General Optical Council

UK Optical Education

GOC Approved Qualifications 2026



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Overview: the sector at a glance

GOC approved qualifications and qualifications approved as 'approved training establishments' (stage 4 applications for approval)

Qualification type	Number of providers	Number of approved qualifications which meet the 'old' QA handbooks	Number of approved qualifications which meet the ETR*
Optometry (OP)	18	22	17**
Independent prescribing (IP)	6	3	3***
Dispensing optics (DO)	7	2	5
Contact lens optician (CLO)	1	0	1

*Includes providers with full GOC approval already adapted to the Education and Training Requirements (ETR) or at stage 4 of the staged application process who have been granted GOC approval to recruit to the qualification.
**Includes two qualifications combining Optom with IP
*** Standalone IP qualifications only, not including combined Optom with IP

Student Numbers

Total students	2022/23	2023/24	2024/25	2025/26
OP*	3,296	3,466	3,448	3,421
IP	521	415	580	N/A**
DO	783	952	1,088	1,054
CLO	59	88	56	41

*excludes those on College of Optometrist's Scheme for Registration. 994 students were on the SfR (with an end date) between 1 July 2024 and 30 June 2025.
**complete total trainee numbers for IP are unavailable for 2025/26. This figure will be reported in next year's report.

Admissions to year 1	2022/23	2023/24	2024/25	2025/26**
OP	1,039	1,114	1,187	1,381
DO	346	338	305	447

**Student registration data substitutes admissions data which will be supplied to the GOC later in 2026.

2025 National Student Survey (NSS): Average scores by category in optometry and subjects allied to medicine*

* For DO qualifications, participation in the NSS was limited to one of the smaller GOC approved providers in terms of student numbers and so for this reason we are not presenting NSS data for DO qualifications this year.

	Optometry 2024	Optometry 2025	Subjects allied to medicine
Teaching	91.5%	90.2%	86.9%
Learning Opportunities	88.0%	88.2%	84.8%
Assessment and Feedback	80.4%	83.2%	80.5%
Academic Support	89.1%	92.3%	84.8%
Organisation and Management	85.2%	87.1%	69.7%
Learning Resources	86.3%	87.3%	88.5%
Student Voice	79.9%	80.9%	76.9%
Student Union	77.6%	81.9%	79.8%

Average academic offer

UCAS Points	2021/22	2022/23	2023/24	2024/25
OP	134	136	134	134
DO	47	61.3	5 GCSEs (Grade 4-9/ C+)	5 GCSEs (Grade 4-9/ C+)

Average percentage of students exiting the qualification

Students exiting without graduating	2023/24			2024/25		
	Year 1	Year 2	Year 3	Year 1	Year 2	Year 3
OP	6.3%	4.4%	1.4%	4.7%	2.3%	1.0%
DO	4.5%*	1.3%	2.2%	8.6%	0.5%	0.0%

* Largest DO qualification

Strengths, weaknesses, opportunities and threats

SWOT analysis: optical education sector	
Strengths	Weaknesses
Admissions are expanding strongly, with 2025/26 optometry and dispensing optics entrants increasing by 16.3% and 46.6% respectively compared with the closest comparable 2024/25 data. Optometry remains academically competitive, with median offers equivalent to AAB at A-level and application-to-admission ratios indicating continued demand. Student satisfaction is generally strong, with 2025 NSS scores for optometry above subjects allied to medicine in most categories. Progression and attrition indicators for optometry have improved, including higher progression across all three measures and a lower proportion not completing within a single cohort. Attainment remains high, with most optometry students gaining a 2:2 degree or above and a strong Scheme for Registration pass rate of 93.4%. Dispensing optics provides a flexible route into the profession with the new degree level apprenticeship. Sector collaboration remains a key asset, including SPOKE activity, shared work on clinical learning, and supporting ETR implementation. Number of registered independent prescribing optometrists increases by 19.7% to 2,474 (2,066 in 2025).	Statistical testing suggests differences in progression and attainment by gender, age, and ethnicity, but further work is needed to understand the reasons for these differences. Enhanced EDI data is incomplete for some providers, with internal reporting thresholds for small numbers limiting sector-level interpretation Some NSS categories remain comparatively weaker, including assessment and feedback, student voice and students' union. Student welfare and culture remain areas requiring attention, including stress-related absence, harassment, discrimination and confidence in reporting concerns.

Opportunities	Threats
New optometry qualifications at the University of Leicester and De Montfort University, and the dispensing optics apprenticeship at Anglia Ruskin University, provide opportunities to expand capacity and geographical reach. The first integrated optometry and independent prescribing qualifications in Scotland create scope to increase prescribing capability and support enhanced community services. AI and digital health developments provide opportunities to modernise curricula, assessment, AI literacy and preparation for technology-enabled practice. The UK Eye Care Data Hub and streamlined international registration routes can support workforce planning, service design and workforce capacity. Strong interest in new optometry and dispensing optics qualifications could expand capacity further, increase geographical reach and support widening participation.	Financial pressures across higher education could affect the viability, investment capacity or risk appetite of innovation. New and expanding provision may intensify competition for students, placements, supervisors and clinically experienced academic staff. Clinical placement availability remains a key dependency as ETR cohorts progress and more students require supervised patient-facing experience. If differential progression and attainment outcomes are not understood and addressed, inequalities could persist or widen. If welfare, culture, harassment and discrimination concerns are not addressed effectively, confidence in optical education and interest in optical careers could be affected. AI and digital health developments may create risks for academic integrity, assessment security, fairness and safe practice if not managed proportionately.

Key themes: Optical education advances in 2026

1. Optical education is moving forward at pace, with significant progress implementing the Education and Training Requirements (ETR) especially regarding clinical training where the transition to integrated Master's qualifications is now a reality. The College of Optometrist's first Clinical Learning in Practice (CLiP) positions launched in 2025 and 2026 marking a major scaling-up of ETR placement activity, with more than 500 students across multiple UK universities undertaking CLiP positions that embed supervised patient-facing clinical experience within optometry degree qualifications. Optical education is also benefitting from increased capacity with the University of Leicester and De Montfort University (also in Leicester) launching new optometry qualifications in 2026 (following stage 3 approval from the GOC of their respective qualifications), as well as a new dispensing optics apprenticeship launching this year.

2. Artificial Intelligence (AI) is increasingly shaping healthcare and education, and regulators are actively considering how best to respond. We joined five other health and care regulators in publishing a joint statement on the use of AI in professional education and training. The statement emphasises key principles that education providers should consider in the delivery of their qualifications which include accountability, academic integrity, AI literacy, and preparation for practice on the appropriate use of AI. Meanwhile, Ofqual has continued to develop its approach to regulating the use of AI in qualifications, focusing on ensuring fairness for students, maintaining the validity of qualifications, protecting the security of assessments, and maintaining public confidence, while recognising the opportunities that AI presents for innovation, particularly regarding assessments. More broadly, alongside other regulators, we are considering recommendations by the National Commission into the Regulation of AI in Healthcare, which are aimed at creating a coherent, consistent and proportionate approach to AI regulation.

3. We have also started the process of streamlining our international registration routes, following an analysis of potential equivalent non-UK optometry qualifications and qualification systems. The qualification systems in Canada and the USA were assessed as matching or exceeding the ETR, enabling direct entry to the GOC register. Professionals from these countries are already benefiting from the direct access route supporting workforce capacity. In many other cases, applicants will need to complete a short GOC approved qualification designed for graduates/professionals with non-UK optometry qualification(s) prior to joining the GOC register, except for Australia, New Zealand and Ireland, where sufficient clinical experience may be evidenced for direct entry to the register on top of their acquired qualification(s).

4. While progress is evident across many areas, challenges remain. One area of particular concern is the continued prevalence of sexual misconduct in higher

education. The Office for Students (OfS) has published evidence demonstrating the scale of the issue in English higher education and has introduced strengthened regulatory requirements designed to ensure that universities take effective action to prevent and address harassment and sexual misconduct.

5. Taken together, the expansion of CLiP positions, regulatory developments on AI, and the modernisation of our international registration routes, demonstrate a sector that is evolving purposefully.

Our Approach

6. Like last year, the data and analysis presented in this report are organised around five high-level outcomes that we wish to achieve.

7. The five high-level outcomes are:
   - Outcome 1 – Sufficient students to meet patient needs
   - Outcome 2 – Qualifications equip registrants to deliver safe and effective eye care for all
   - Outcome 3 – High levels of student satisfaction and welfare
   - Outcome 4 – A strong, innovative and resilient sector
   - Outcome 5 – Post-registration qualifications support registrants to deliver a wide range of eye care services in communities.

8. Each outcome contains a series of metrics (such as numbers of applications and admissions etc). Data generally reflects the 2024/25 reporting year, however, where available and appropriate to use, more recent data for 2026 has been included, such as recent registration data. These metrics are supported by qualitative assessment as appropriate. Our basket of indicators is summarised in the graphic on page 9.

9. The report uses information from a range of sources, including information submitted by providers of GOC approved qualifications as well as GOC surveys, internal data and news about developments in healthcare and education from external organisations such as the UK Government and Office for Students.

Basket of indicators	
High-level Outcomes	**Indicators**
Sufficient students to meet patient needs	• Applications numbers • Admissions numbers • Applications/admissions ratio • Average UCAS points offer • New GOC registrations • Attrition – % Year 1 students not progressing to Year 2 • Attrition – % students not completing qualification within single cohort • Attrition - % students exiting qualification in Year 1 • EDI – figures on admissions, progression and attainment for gender, age, ethnicity and disability
Qualifications equip registrants to deliver safe and effective eye care for all	• Attainment – % students getting a pass grade (required by the GOC) • % registrants being pre-registration supervisors
High levels of student satisfaction and welfare	• National Student Survey scores • Negative culture - % students experienced harassment, abuse or bullying in last 12 months • Negative culture - % students experienced discrimination in last 12 months • Negative culture - % students reporting these behaviours • Negative culture - % students taking leave of absence due to stress in last 12 months
A strong, innovative and resilient sector	• Numbers of GOC approved qualifications • Quality assurance and enhancement activity - % ETR requirements assessed as met • Quality assurance and enhancement activity – number of conditions and serious concerns • Financial sustainability – commentary • Innovation – commentary • Risk analysis - commentary
Post-registration qualifications support registrants to deliver a wide range of eye care services	• % registrants interested in obtaining post-registration qualifications • % registrants holding post-registration qualifications • GOC registration numbers for contact lens opticians and independent prescribers • Numbers of IP and CLO trainees • Admissions numbers for IP and CLO • Attainment - % students achieving pass or higher • EDI – cohort data by gender, age, ethnicity, disability • EDI – progression from entry-level qualifications

Outcome 1: Sufficient students to meet patient needs

Applications and admissions

10. The optical education and workforce landscape is continuing to evolve. As noted in the key themes section, new and revised qualifications are coming through the approval pipeline, and degree-level apprenticeships are creating additional routes into the profession. At the same time, the expansion of community-based eye care and the growing clinical role of optical professionals mean that workforce supply needs to be considered in the context of service redesign and changing patient needs across the UK.

11. A sufficient supply of appropriately qualified optical professionals will be critical if enhanced eye care is to be delivered safely and effectively in community settings, helping to manage demand on GPs and hospital eye services. This will require not only overall workforce growth, but also the right mix of skills, qualifications and supervision arrangements to support new models of care, with attention to geographical distribution, including remote, rural and underserved areas. The launch of the UK Eye Care Data Hub in 2025 developed by The College of Optometrists has an important role modelling the eye care workforce and the prevalence and incidence of eye diseases to support planning, service design, and workforce optimisation.

12. It remains the case that our role is not to determine workforce capacity requirements. However, we can support informed planning by making registration and education data available where appropriate, and by ensuring that regulatory requirements do not create unnecessary barriers to supply. The ETR has removed regulatory caps on student numbers, and the development of new qualifications and routes into the professions provides further opportunity for the sector to respond to future demand.

13. Enhancing the attractiveness of careers in optics is a sector priority. Application numbers remain strong[1] and there is interest in setting up new qualifications in optometry and dispensing optics. At the end of July 2026, across all qualification types, 12 applications for new qualifications were in progress. There will be three additional qualifications beginning in September 2026: two optometry Masters' Degrees at the University of Leicester, and De Montfort University, as well as a dispensing optics apprenticeship qualification at Anglia Ruskin University. Meanwhile, the Sector Partnership for Optical Knowledge and Education (SPOKE) has secured additional funding to deliver training and resources for local careers outreach activities to attract interest in the optical professions.

[1] Whilst there were 7,419 applications to optometry qualifications in 2024-25, and 357 applications for Dispensing optics it's important to note these are not unique applications with many individuals applying to multiple providers. The number of unique individual applicants is not available.

14. A comparison between admissions data from 2024/25 and student registration data from 2025/26[2] (the closest comparable data) shows an increase of 16.3% in new entrants for optometry, and an increase of 46.6% for dispensing optics. These both represent significant expansion in student numbers.

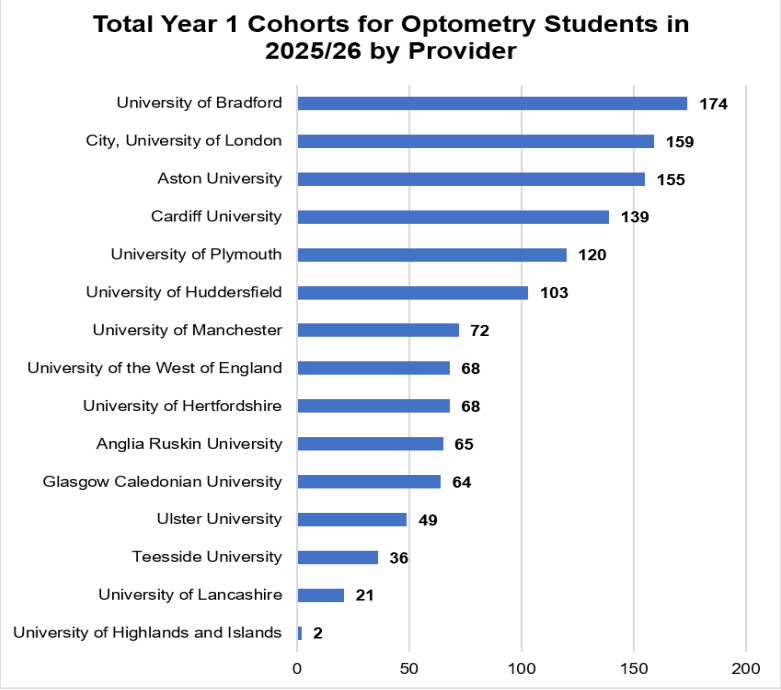
Optometry

15. Although total optometry (OP) figures have decreased slightly by 1.3% since 2023/24 with 3,421 total numbers of students in 2025/26 compared with 3,466 students in 2023/24, there has been a significant increase of 16.3% in Year 1 admissions from 1,114 in 2023/24 to 2,381 in 2025/26. Given the planned expansion in OP qualifications reported in paragraph 13, we may see further growth in admissions next year. There remains a considerable range of small, medium, and large cohort sizes (see Table 1). Meanwhile, the College of Optometrists' Scheme for Registration cohort comprised 994 students (968 in 2023/24).

16. Across all OP qualifications, 35 international students were admitted (2.9% of all admissions) compared with 36 students in the previous reporting year[3].

17. Entry to OP qualifications has become very slightly less competitive this year. Education providers admitted an average of 18.8% (17.9% in 2023/24; 21.7% in 2022/23) of all applicants with a range of 7.0% to 37.1%.

Table 1 – Year 1 optometry cohort by provider in 2025/26



[2] Provider admissions data for the next academic year (2025/26) is not available and GOC student registration data for the 2025/26 year 1 cohort is used instead as the closest comparable data. The provider data for 2025/26 will be available in next year's report.
[3] Excludes the Scheme for Registration Stage 2 qualification

Table 2 – Optometry cohort and admissions

	2023/24	2024/25	2025/26
Total OP students	3,466	3,448	3,421
Year 1 admissions[4]	1,114	1,187	1,381*

* Registration data

Dispensing optics

18. Although total DO student figures fell this year, they have increased by 9.8% since 2023/24. After admissions fell slightly last year, there has been a steep rise this year from 305 to 447, representing a 46.6% increase. Given the planned expansion in DO qualifications reported in paragraph 13, including the apprenticeship route, we may see further growth in admissions next year.

19. The 2025/26 Year 1 dispensing optics cohort sizes by provider is provided in table 3 below.

Table 3 – Year 1 dispensing optics cohort by provider in 2025/26

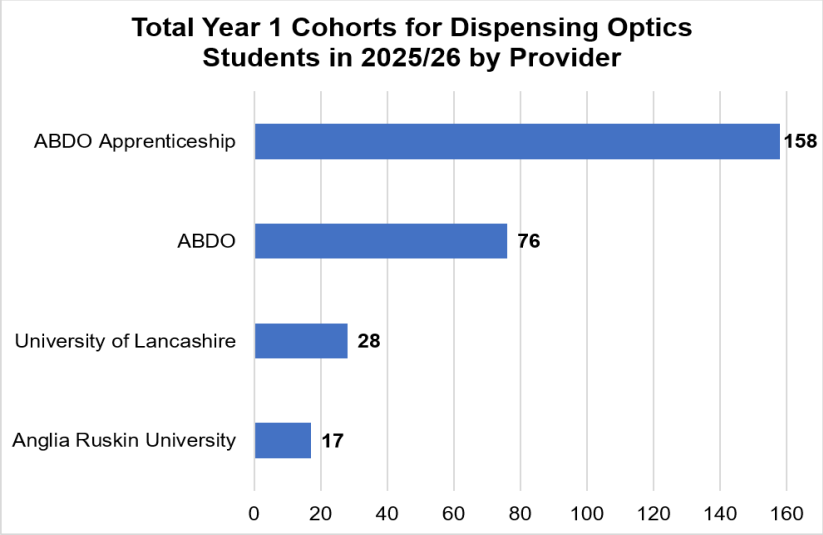


Table 4 – Dispensing optics cohort and admissions

	2023/24	2024/25	2025/26
Total DO students	960	1,139	1,054
Year 1 admissions	338	305	447*

* Registration data

[4] The admissions ratio for optometry of 18.8% (mean) or 18.3% (median) does not infer the overall volume of individual applicants who were unable to secure a place as each may have applied for more than one optical qualification and we do not hold this information. Dispensing optics information is not available given the disparate size of providers and that the dominant provider is not routed via UCAS.

Average UCAS points offer

20. UCAS tariff points provide a common metric of standardising applicants with different qualifications (for example, ‘A’ Levels, ‘AS’ Levels, ‘BTEC’s etc). In general, UCAS points can indicate the competitiveness of qualifications in attracting high tariff (or quality) students.

21. The median academic offer made by OP qualifications to prospective students was 136.0 UCAS tariff points which approximately equates to AAB grades at A-Level in England (same as the past three years). Average entrance attainment was 5.2% higher than the mean academic offer at 138.9 UCAS points.

22. For dispensing optics, student admissions are not routed via UCAS applications, so this information is unavailable. However, for providers teaching dispensing optics qualifications, the average academic offer is five GCSEs at grade 4-9 /C+ (inc. mathematics, English and science).

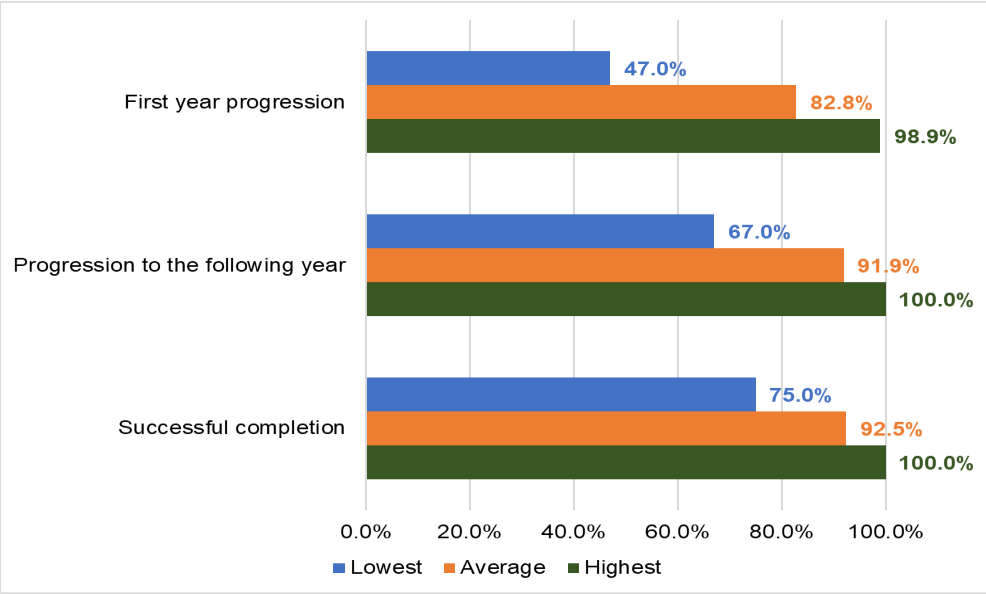
Progression and attrition

Progression rates

23. Progression rates reflect how well students are developing in their journey to becoming a fully qualified GOC registrant. For optometry, an average of 82.8% (78.8% in 2023/24; 81.7% in 2022/23) students progressed to the second year, an average of 91.9% (86.6% in 2023/24; 84.8% in 2022/23) progressed to the following year of the qualification, and an average of 92.5% (90.5% in 2023/24; 90.2% in 2022/23) of final year students successfully completed the qualification. Therefore, there is evidence of improved progression rates across all three measures. Standard deviation is higher for first year progression at 13.5%, and so rates vary, and the provider with the lowest rate of 47% cited a year-on-year fall coinciding with the replacement of a BSc with an MOptom qualification.

24. Meanwhile, for dispensing optics, an average of 97.3% of students with the largest DO provider progressed to the second year, and 88.5% (85.1% in 2023/24; 83.2% in 2022/23) final year students completed the course. For the two qualifications with smaller cohorts, an average of 62.5% of students progressed to the second year (SD: 2.5%), and an average of 86% of students progressed to the third year (SD: 9.5%).

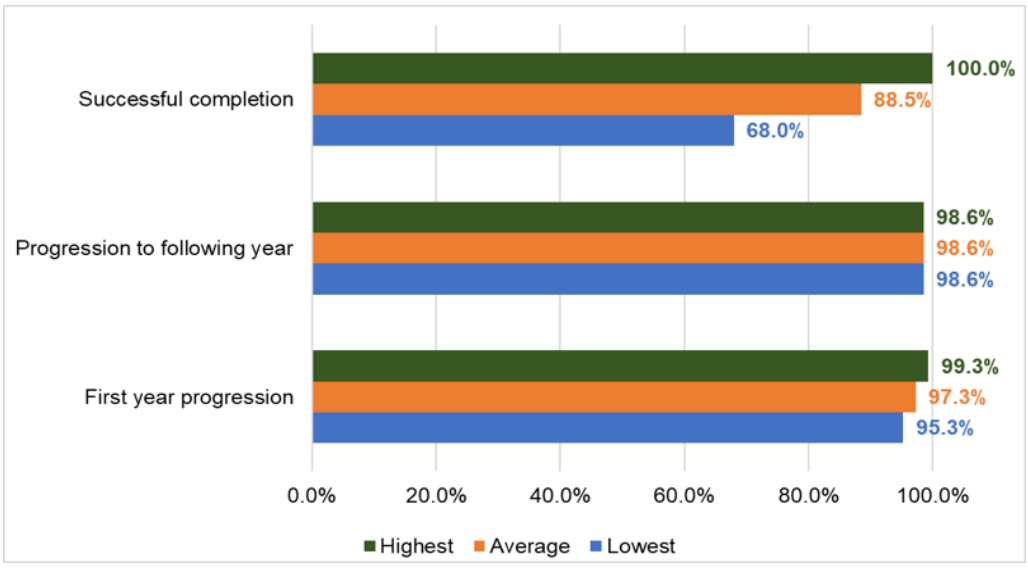
Table 5 – Optometry progression



Standard deviation:
First year progression σ = 13.5%
Progression to following year σ = 8.0%
Successful completion σ = 7.7%

25. Meanwhile, for dispensing optics, an average of 97.3% of students with the largest DO provider progressed to the second year, and 88.5% (85.1% in 2023/24; 83.2% in 2022/23) final year students completed the course[5]. For the two qualifications with smaller cohorts, an average of 62.5% of students progressed to the second year (SD: 2.5%), and an average of 86% of students progressed to the third year (SD: 9.5%).

Table 6 – DO student progression



Note: First and second year progression data relates to the ETR cohort where data reflects the largest provider.

[5] Based on attainment/progression data for all relevant providers with graduating cohorts.

Standard deviation:
First year progression σ = 2.0%
Progression to following year σ = 0.0%
Successful completion σ = 13.7%

Attrition

26. The overall percentage of OP students not completing a qualification within a single cohort (i.e. leaving between the start and end of the expected qualification duration or retaking final year assessment(s)) was 20.4%[6] (24.5% in 2023/24; 21.8% in 2022/23). The percentage figure for dispensing optics is not comparable due to different assessment timeframes compared with optometry under the handbook requirements.

27. The average rate of students exiting a qualification for year one was 4.7% (6.3% in 2023/24) of optometry students and for DO students the rate was 3.6% (4.5% in 2023/24) and 0.7%[7] for the largest provider's two approved qualifications (the Diploma and Apprenticeship respectively).[8]

Equality, diversity and inclusion

28. Providers were asked to submit EDI data, and widening participation information used to inform the development of access and participation plans and initiatives in operation.

29. As noted in previous reports, the Professional Standards Authority (PSA) has strengthened its Standards of Good Regulation relating to EDI – the criteria it uses to assess performance of the healthcare regulators. The evidence matrix developed to support its strengthened Standard 3 includes expectations relating to taking appropriate account of diverse student needs, improving the diversity of student admissions and progression, and identifying unfair differential attainment in training.

30. We asked providers to supply enhanced EDI information for admissions, progression and attainment relating to gender, age group, ethnicity, and disability and this information is featured below. We are reviewing our approach to collecting enhanced EDI information ahead of issuing the next annual monitoring return (AMR) forms to ensure we collect information in a proportionate way. We already request some information from providers and student registrants as part of our registration processes, and we intend to use that to ascertain enhanced EDI data to reduce the current reporting burden on providers.

[6] These percentage figures take account of the percentage share of students for each provider to arrive at a total weighted percentage.
[7] This is the first reporting year for the dispensing optics apprenticeship, therefore data for previous years is not available.
[8] The average percentage exit rate for optometry drops slightly in later years (2.3% for year 2 and 1.1% for year 3). It is important to note that for optometry these are average sector rates with variance across the sector for each year.

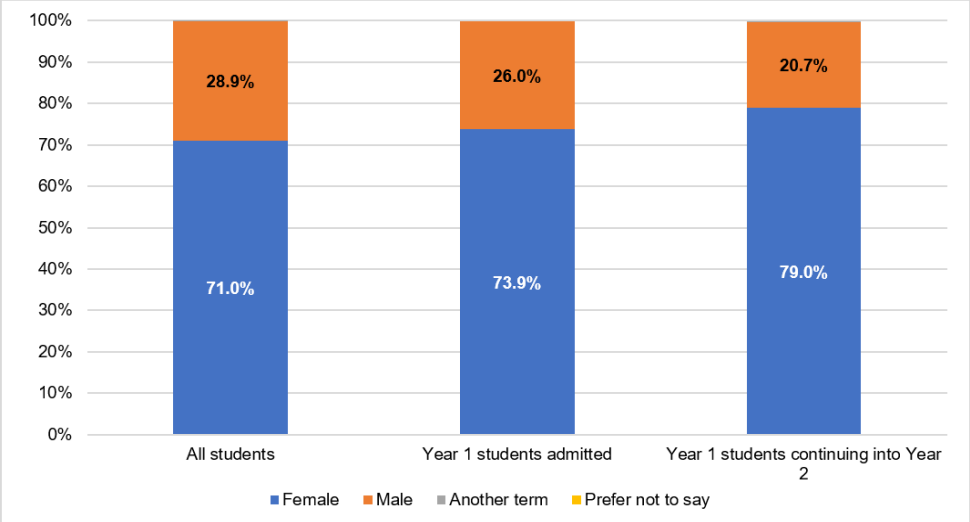
31. Overall, statistical testing in respect of gender, age groups, and ethnicity suggests that some differences identified in progression and attainment are unlikely to be due to random variation alone and are therefore likely to represent genuine differences in outcomes. However, further analysis would be required to understand reasons for those differences. Not all providers were able to provide the full data requested and the main reason for this is low numbers where there is a risk individuals could be identified and internal threshold reporting policies are in place.

32. On average, like previous years, most OP students are Asian, female, and aged 20 and under. Most DO students are White, female, and aged 30 and over. Longer-term trends suggest that over the past four years, for both OP and DO qualifications, there has been a gradual increase in the percentage[9] of female students.

Gender

33. As in previous years, over seven in ten OP students are female. The average range of female students between providers is 51.0% to 84.4%. There is a 9.9%pt difference between females (83.2%) and males (73.3%) progressing into Year 2. Meanwhile for attainment, there is a 6%pt difference between females (96.4%) and males (90.4%) achieving a grade required by the GOC. Statistical testing suggests that both the progression and attainment differences are unlikely to be due to random variation alone and are therefore likely to represent genuine differences in outcomes between male and female students. However, further analysis would be required to understand the reasons for these differences.

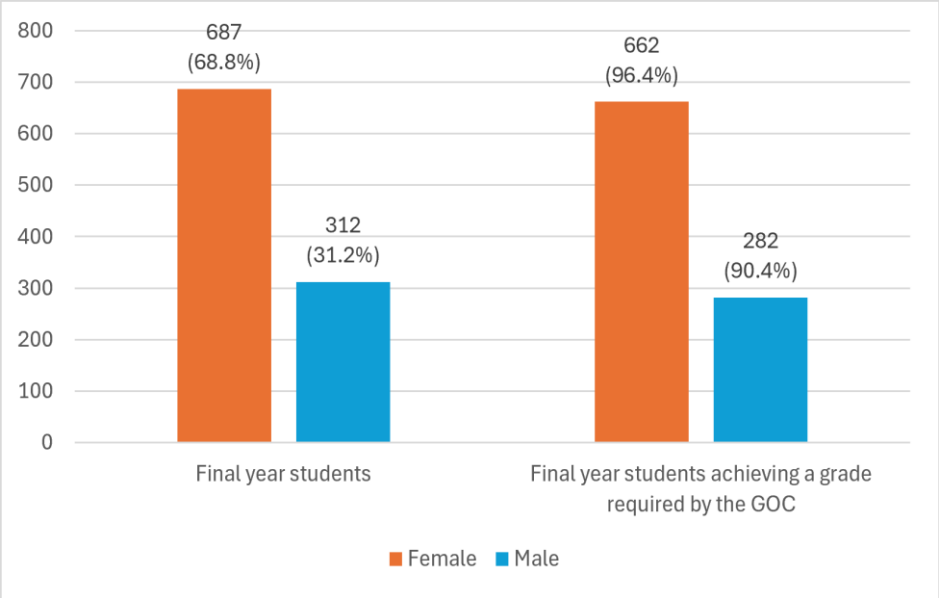
Table 7 – Admissions and progression by gender (OP)



[9] Average (mean) figures across providers are used.

Year 1 students progressing into Year 2 – Gender data			
	Progressing	Not progressing	Standard deviation σ
Females	83.2%	16.8%	12.7%
Males	73.3%	26.6%	21.0%

Table 8 – Attainment by gender (OP)

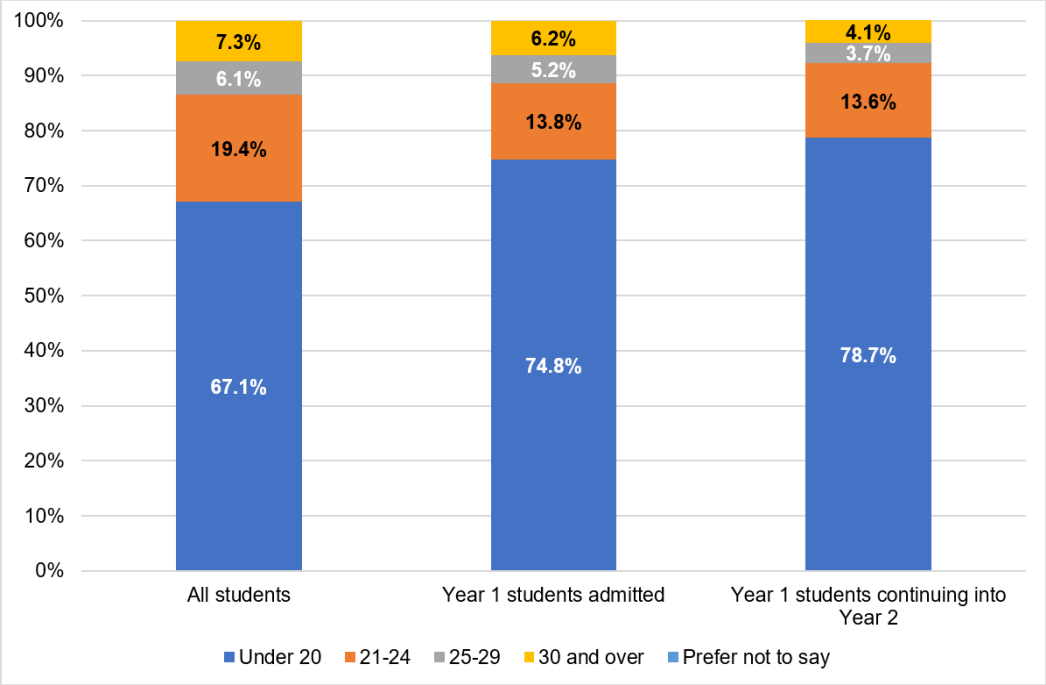


Standard deviation – Final year students achieving a grade required by the GOC (2.2+):
Female σ = 9.5%
Male σ = 9.4%

Age

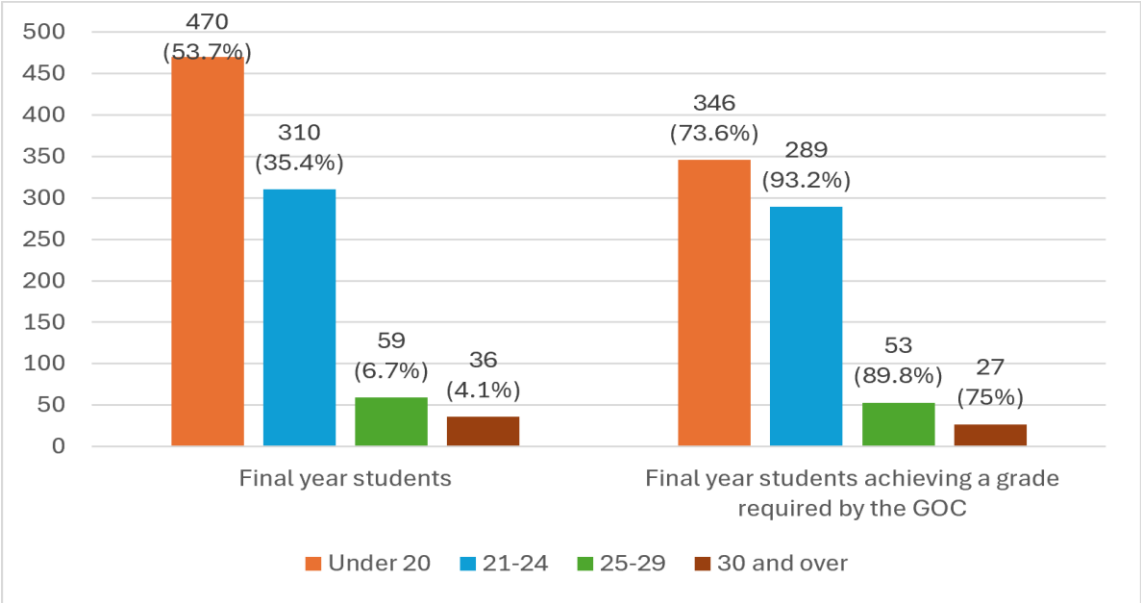
34. 67.1% (61.5% in 2023/24) of OP students are aged 20 or under, and 86.5% (83.3% in 2023/24) are 24 or under. 7.3% of OP students are aged 30 or over. There is a 15.7%pt difference between those aged under 20 (83.4%) and those aged 30 and over (67.7%) progressing into Year 2. Meanwhile, the difference between those under 20 and 21-24-year-olds is 7.2%pt and for 25–29-year-olds is 8.4%pt. Attainment rates are highest for 21-24-year-olds (93.2%) and lowest for the under 20s (73.6%). A statistical assessment suggests that the differences in attainment between age groups are unlikely to be explained by random variation alone, with the strongest contrasts observed between students aged 21-24 and both the youngest and oldest age groups. There is also some evidence that progression rates vary by age, although this relationship appears less pronounced than for attainment and should be interpreted with caution given the relatively small numbers in some age categories.

Table 9 – Admissions and progression by age (OP)



Year 1 students progressing into Year 2 – Age data			
	Progressing	Not progressing	Standard deviation σ
Under 20	83.4%	16.6%	15.8%
21-24	76.2%	23.7%	19.2%
25-29	75.0%	25.0%	33.2%
30 and over	67.7%	32.3%	27.0%

Table 10 – Attainment by age (OP)

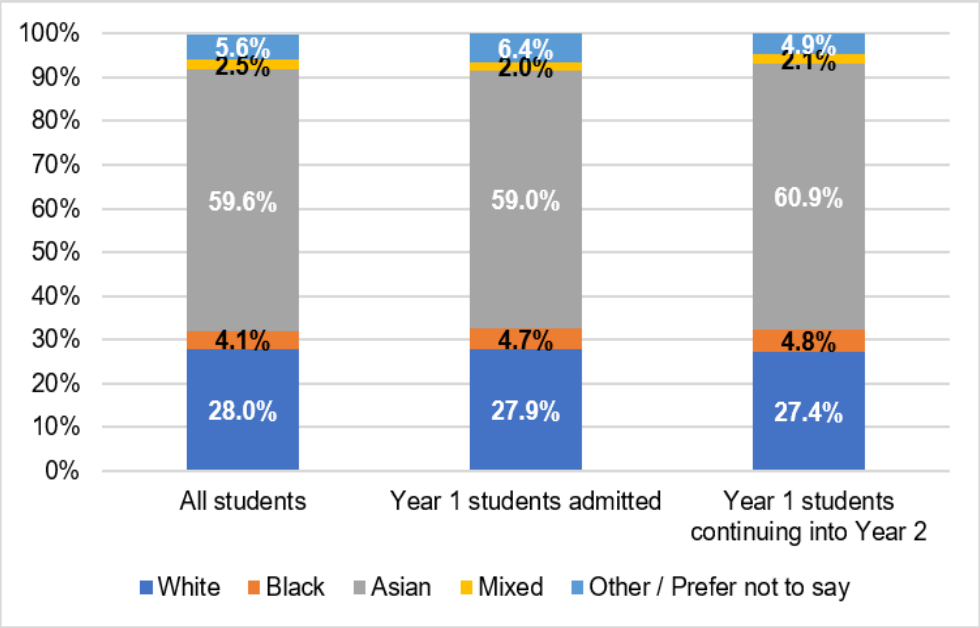


Standard deviation – Final year students achieving a grade required by the GOC (2.2+):
Under 20 σ = 6.1%
21-24 σ = 30.1%
25-29 σ = 11.7%
30 and over σ = 36.9%

Ethnicity

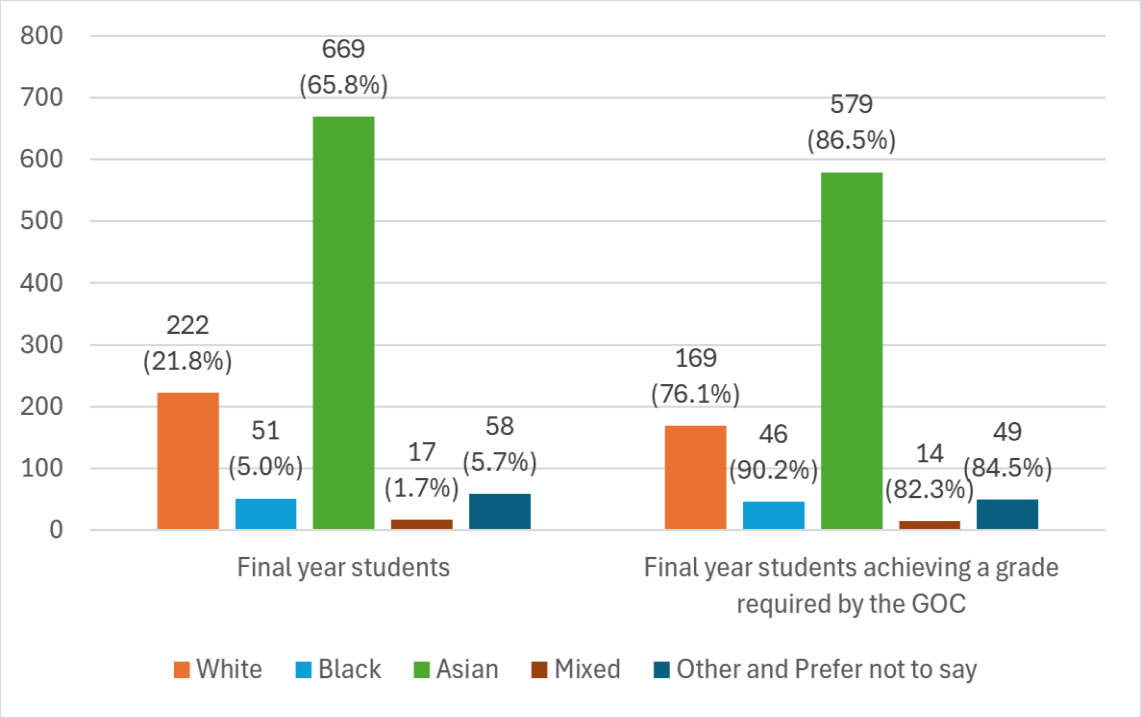
35. Ethnicity data for total student cohort by proportion is similar to previous years. There is a 9.3%pt difference between Asian students (84.2%) and white students (74.9%) progressing into Year 2, whilst progression rates were highest among black students (92.8%). Attainment rates are highest for black students (90.2%) and lowest for white students (76.1%). Statistical testing suggests that both progression and attainment rates vary across ethnic groups, and that the differences observed are unlikely to be explained by random variation alone. Some ethnic categories (black and mixed) contain relatively small numbers of students and therefore the results should be interpreted with caution.

Table 11 – Admissions and progression by ethnicity (OP)



Year 1 students progressing into Year 2 – Ethnicity data			
	Progressing	Not progressing	Standard deviation σ
White	74.9%	25.1%	15.5%
Black	92.8%	7.1%	18.2%
Asian	84.2%	15.8%	16.2%
Mixed	86.9%	13.0%	21.6%
Other / Prefer not to say	74.6%	25.3%	42.5%

Table 12 – Attainment by ethnicity (OP)

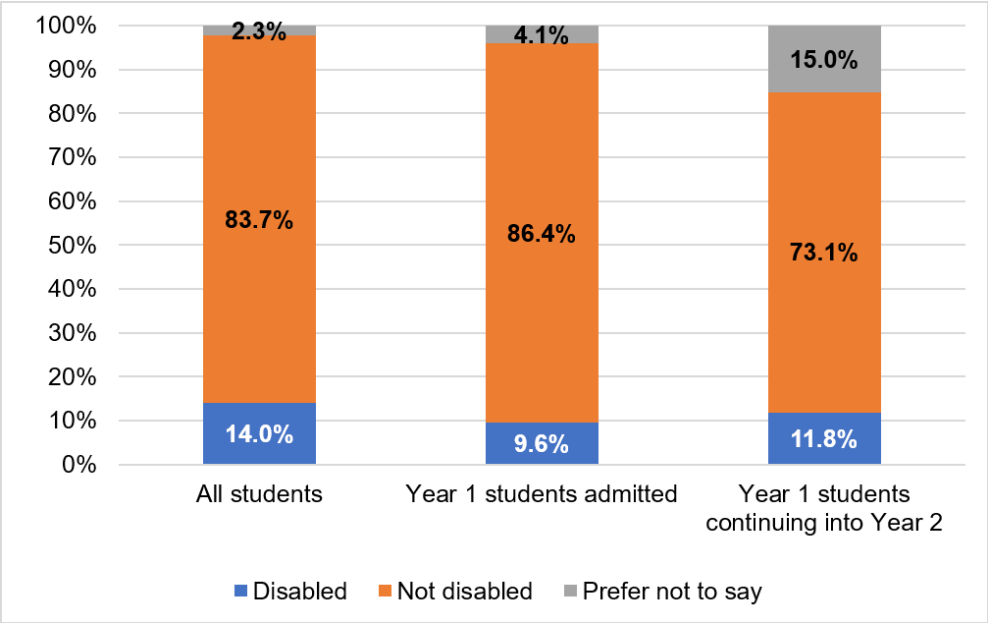


Standard deviation – Final year students achieving a grade required by the GOC (2.2+):
White σ = 3.8%
Black σ = 10.0%
Asian σ = 5.7%
Mixed σ = 17.5%
Undisclosed σ = 9.2%

Disability

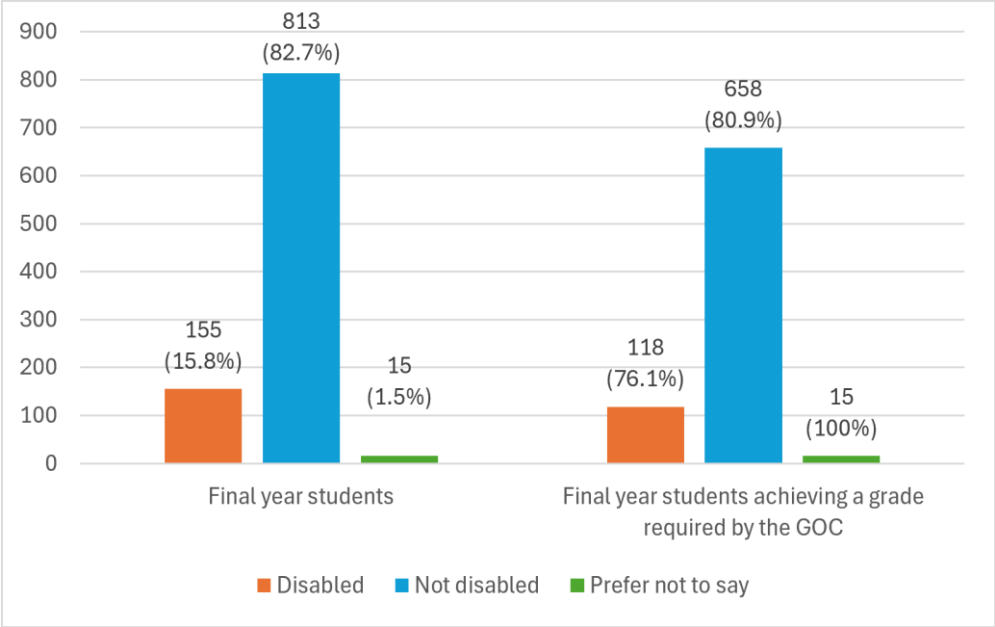
36. The proportion of students declaring a disability increased year-on-year from 6% in 2020/21 to 14.9% in 2023/24, with a slight decrease to 14.0% in 2024/25. There is an 18.1%pt difference between students with a disability (90.3%) and students without a disability (72.2%) progressing into Year 2. For attainment, there is a 4.8%pt difference between students without a disability (80.9%) and students with a disability (76.1%) achieving a grade required by the GOC. Statistical testing suggests that the difference in progression rates between students with and without a declared disability is unlikely to be due to random variation alone. By contrast, the difference in attainment rates is not statistically significant and should therefore be interpreted with caution.

Table 13 – Admissions and progression by disability status (OP)



Year 1 students progressing into Year 2 – Disability status data			
	Progressing	Not progressing	Standard deviation σ
Disabled	90.3%	9.7%	18.2%
Not disabled	72.2%	27.8%	18.2%

Table 14: Attainment by disability status (OP)

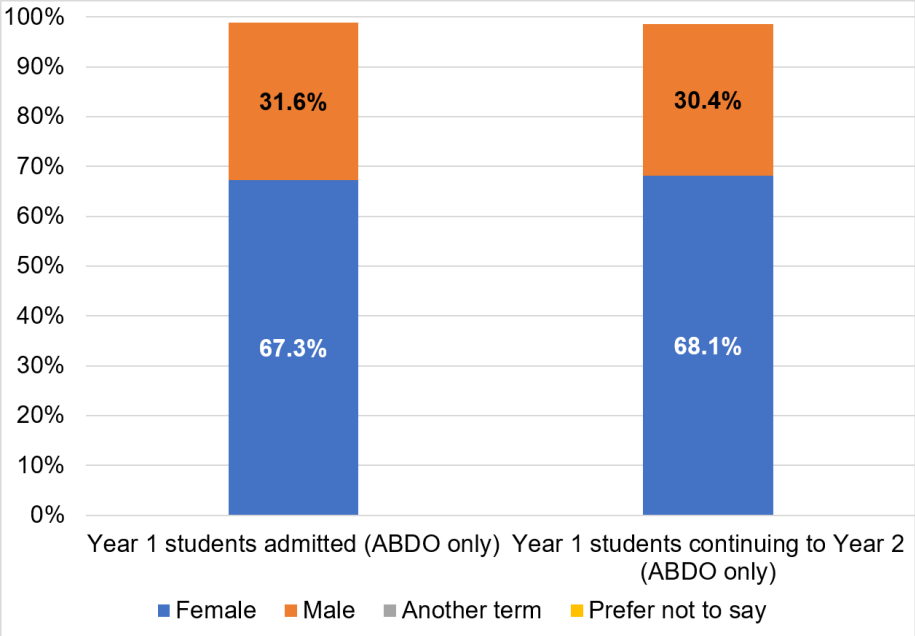


Standard deviation – Final year students achieving a grade required by the GOC (2.2+):
Disabled σ = 18.2%
Not disabled σ = 9.3%

Dispensing optics

37. Average data[10] relates to the two dispensing optics approved qualifications run by the largest ETR provider accounting for over 90% of students in the Year 1 2024/25 cohort. EDI data for other providers was incomplete with high levels of variance in some areas. There is insufficient data relating to EDI attainment for statistical significance testing purposes. Meanwhile, general attainment data for dispensing optics is provided in the next chapter.

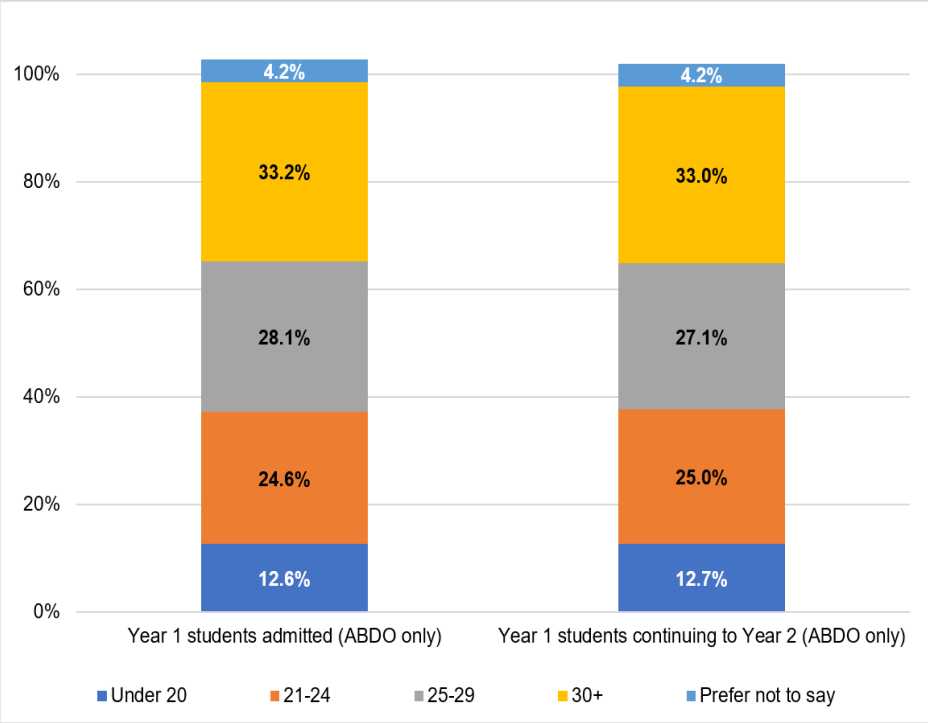
Table 15 – Admissions and progression by gender (DO)



Year 1 students progressing into Year 2 – Gender data (ABDO only)			
	Progressing	Not progressing	Standard deviation σ
Females	97.3%	2.7%	1.8%
Males	93.1%	6.9%	7.0%

[10] Where data is withheld for an indicator relating to one of the two dispensing optics qualifications, alternative data is provided in respect of the other qualification, rather than not at all, if this is available. This occurs twice within the age group category ("20 and under", and "Prefer not to say").

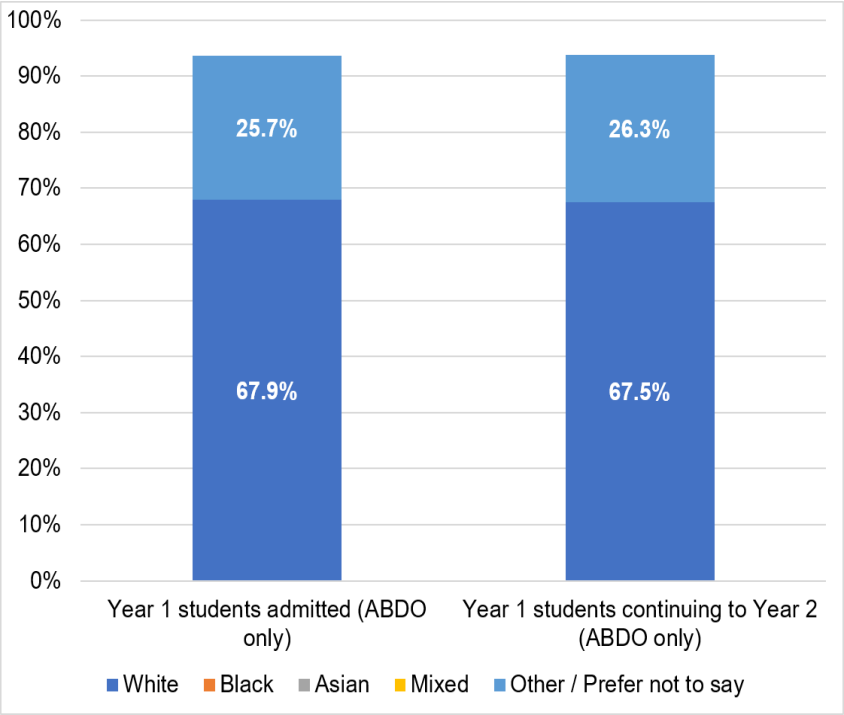
Table 16 – Admissions and progression by age (DO)



Note: Numbers in the above table may total >100% due to withheld data being excluded and, as a result, averages being slightly higher than the true number.

Year 1 students progressing into Year 2 – Age data			
	Progressing	Not progressing	Standard deviation σ
Under 20	100.0%	0.0%	N/A
21-24	98.5%	1.5%	1.8%
25-29	93.5%	6.5%	6.25%
30 and over	95.6%	4.4%	1.8%

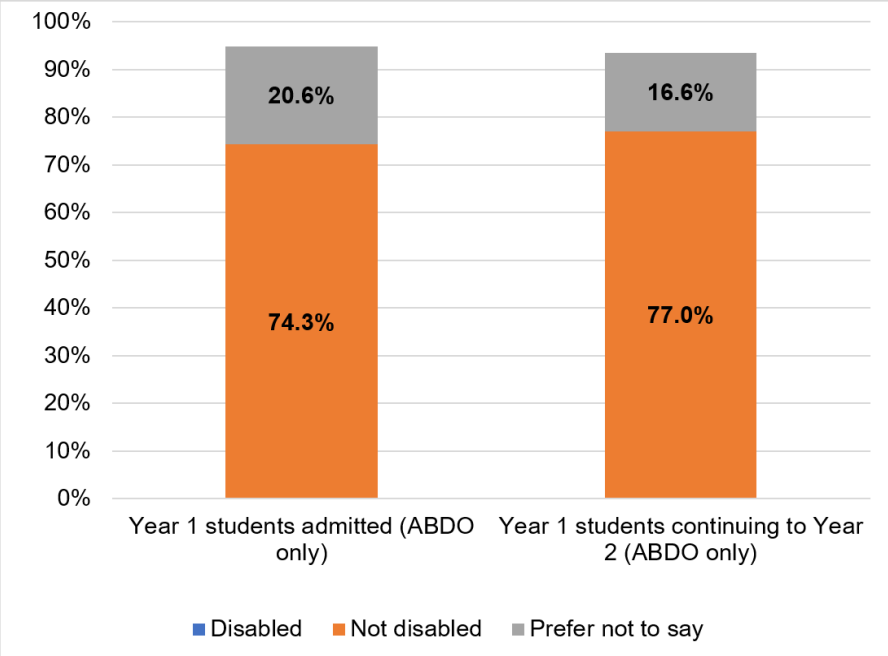
Table 17 – Admissions and progression by ethnicity (DO)



Due to some data being withheld, totals for the “ABDO only” bar tables do not sum to 100%.

Year 1 students progressing into Year 2 – Ethnicity data			
	Progressing	Not progressing	Standard deviation σ
White	92.2%	8.0%	4.0%
Black	Data withheld	Data withheld	-
Asian	Data withheld	Data withheld	-
Mixed	Data withheld	Data withheld	-
Other / Prefer not to say	98.6%	1.4%	1.3%

Table 18 – Admissions and progression by disability status (DO)



Year 1 students progressing into Year 2 – Disability status data			
	Progressing	Not progressing	Standard deviation σ
Disabled	Data withheld	Data withheld	-
Not disabled	100%	0.0%	0.0%

Widening Participation

38. Providers collect and review admissions, enrolment, attainment, award, continuation, completion and progression data, often disaggregated by protected characteristics and widening participation (WP) indicators. WP information may include a student's declared disability, ethnicity, gender, age group, socio-economic background, religion or belief, sexual orientation, first generation university student (or not), and refugee status.

39. Most data are collected centrally by universities through admissions, enrolment, student record systems, equality monitoring returns, disability services, business intelligence teams and institutional dashboards with various external and regulatory sources of information including HESA.

40. Providers use institutional quality processes to identify and respond to differential attainment, including annual monitoring, programme boards, enhancement planning, course reports, module improvement plans, EDI committees, Access and Participation Plan monitoring, school action plans and award gap action plans. Where gaps are identified or suspected, actions include deeper analysis at module and assessment level and continuing monitoring over multiple cohorts, amongst others.

41. Targeted support includes but isn't limited to early intervention where students show signs of difficulty, study skills provision, mentoring, coaching and leadership programmes, access to wellbeing and disability services, and tailored academic guidance. Providers also address structural barriers through bursaries, hardship funds, Chromebook loans, food vouchers, discounted bus fares, free digital textbooks, etc. Several providers are acting on religious, cultural and timetable barriers, including provision of prayer rooms, adjusting timetables to avoid Eid or Friday worship, offering choice of assessment timings during religious festivals, and avoiding unnecessary clustering of deadlines and assessments.

42. Reasonable adjustments are generally assessed individually by central disability, wellbeing, occupational health or student support services, often resulting in a formal support plan. Qualification teams then implement the recommendations while ensuring professional competence and patient safety requirements are maintained.

43. Some examples of reasonable adjustments in the returns include: common assessment adjustments including additional time, rest breaks, use of a computer, flexible deadlines; teaching and learning adjustments including lecture recordings, electronic or accessible formats, advance access to slides and materials, seating or room adjustments; timetabling and attendance adjustments including considerate spreading of assessments, allowances for absences, adjustments to accommodate caring responsibilities, religious observance etc.

44. Following sector discussions concerning how all students, regardless of their background can progress towards meeting the outcomes for registration without compromising patient safety, a recently published SPOKE report considered the importance of supporting those with disabilities and championing diversity whilst considering where the borderlines lie regarding patient safety. The report summarises the themes identified during SPOKE network discussions which include: robust systems and entry requirements, mental health and undeclared issues, assessing new and chronic health conditions, fitness to practise timelines, confidentiality and data protection, academic misconduct, reasonable adjustments, and assessment of communication outcomes.

45. Most data are collected centrally by universities through admissions, enrolment, student record systems, equality monitoring returns, disability services, business intelligence teams and institutional dashboards with various external and regulatory sources of information including HESA.

Outcome 2: Qualifications equip registrants to deliver safe and effective eye care for all

46. Providers of approved qualifications continue to use the GOC's handbook requirements whilst using the ETR for their more recent cohorts. A longitudinal research impact study is planned to measure the effectiveness of the new outcomes and standards for GOC approved qualifications on registrants' competence, confidence and capability (measuring the change we want to see). Preparation for the impact study is expected to commence in late 2026 and will provide valuable input concerning newly qualified registrants in:
    - feeling prepared for safe clinical practice,
    - feeling confident within their scope of practice, and
    - perceiving gaps in their knowledge, skills and behaviours.

Attainment rate

Optometry

47. To measure attainment, we consider the percentage of degree classifications which are a 2:2 or above and fails.

48. Student attainment on this measure is high but has fallen slightly. Across the providers, an average of 96.7% of optometry students who completed their qualification obtained a 2.2 or higher (98.9% in 2023/24; 99.4% in 2022/23).

49. An average of 1.7% (0.4% in 2023/24; 0.2% in 2022/23) of students failed the qualification. The range of first-class degrees is from 0.0% to 43.1% (0.0% to 33.3% in 2023/24; 10.6% to 63.0% in 2022/23).

50. The pass rate for the College of Optometrists' Scheme for Registration (stage two) was 93.4% (93.6% in 2023/24; 96.3% in 2022/23).

Table 19 – Attainment (OP)

Metric	Lowest	Average	Highest
Degree – First	0.0%	23.3%	43.1%
Degree – 2:2 or higher	83.3%	96.7%	100.0%

Standard deviation:
Degree – First σ = 13.0%
Degree – 2:2 or higher σ = 4.6%

Dispensing optics

51. Analysis of student attainment is difficult for DO qualifications because not all awards are classified in the same way (some use 'pass', 'merit', and 'distinction' grades), some are not classified at all, and some do not follow the traditional academic year structure and are therefore not comparable with optometry. For those qualifications awarding degrees, attainment has fallen this year with an average of 85.5% (91.9% in 2023/24; 93.3% in 2022/23) of students obtaining either a 2:2 or higher (for honours degrees), or a pass or higher (for non-honours qualifications).

Table 20 – Attainment (DO)

Metric	Lowest	Average	Highest
Degree – First	7.7%	17.3%	35.3%
Degree – 2:2 or higher	73.0%	83.3%	100.0%
Degree – Distinction	28.0%	44.0%	56.0%
Degree – Pass, Merit, or Distinction	68.0%	87.6%	100.0%

Standard deviation data not provided due to range of attainment classifications

52. Data from the dispensing optics awarding body focuses on initial attempts of the final assessment. The pass rate for the reporting year is 29.1%, with final completion taking place on an individual basis. The first dispensing optics cohorts graduating from ETR compliant qualifications will be covered in next year's report.

Placements and supervision

53. Progress has been achieved with the development of Clinical Learning in Practice (CLiP) positions, with 500 students starting the Scheme in 2026/27 (and 900 in 25/26), as well as other placement schemes in Manchester and in Scotland. Work continues across the sector to facilitate placements in sufficient numbers. In last year's GOC 2025 business registrant survey, a quarter of respondents had arrangements with universities or the College of Optometrists to offer placements with this being more common amongst multiples (44%) than independent practices (11%).[11]

54. In the GOC's 2026 registrant survey, just over a quarter (26%) of working optometrist respondents had worked as a supervisor for pre-registration trainees in the last 12 months, a six-percentage point increase on the previous year, whilst for dispensing opticians 29% had. Working as a supervisor was more common amongst those who worked for a multiple (39%) compared with

[11] Business Registrant Survey 2025, Impact for the GOC, p24, April 2025. Note: The findings are based on completes from 192 registered businesses, representing 7% of the overall registered business population

independents (12%). There was variation between nations ranging from 18% in Northern Ireland to 32% in Wales. Those supervising trainees are more likely to report feeling unable to cope with their workload (65%) and finding it more difficult to provide patients with sufficient care (40%), than those who do not supervise trainees (57% and 36% respectively).[12] SPOKE is currently updating its supervision guidance which is expected to be published later this year.

Table 21 – Working as a supervisor

Metric	2025	2026
Percentage of working optometrists who worked as a pre-registration supervisor in last 12mths	20%	26%
Percentage of working dispensing opticians who worked as a pre-registration supervisor in last 12mths	Not collected	29%

[12] Registrant Workforce and Perceptions Survey 2026, Enventure Research for the GOC, May 2026, p27

Outcome 3: High levels of student satisfaction and welfare

55. Student feedback from annual monitoring returns suggests that overall, students have a positive view towards their qualification and value their qualification teams for being approachable, and supportive. Students generally appear to recognise teaching quality and the value of clinical placements where their knowledge and skills can be applied in preparation for future practice. They also appreciate support received during assessment periods and are positive about receiving clear explanations of assessment processes. Main concerns raised in the returns relate to timeliness and clarity of communication, the availability of practical learning, and access to resources. Actions raised to address these concerns include enhanced communication plans, earlier release of resources, and expanding practical learning opportunities.

56. Average National Student Survey (NSS) scores for OP qualifications are higher than the 'subjects allied to medicine' (SATM) for all categories except Learning Resources (-1.2%pt). Scores in all categories except Teaching (-1.3%pt) are higher than last year.

57. For DO qualifications, participation in the NSS was limited to one of the smaller GOC approved providers in terms of student numbers and so for this reason we are not presenting NSS data this year. ABDO qualifications are not participating in the NSS and instead collect alternative feedback.

58. In the GOC's 2026 registrant survey, 11% of optometry student respondents had experienced harassment, abuse, or bullying *from tutors, lecturers or supervisors* in the last 12 months, whilst DO student respondents had not experienced any. In terms of overall experience of harassment, abuse, or bullying (i.e. in addition to that experienced above), for 32% of optometry students and 43% of DO students the last incident was reported (either by themselves or a colleague), which is slightly higher than for fully qualified registrants in respect of both professions.

59. 8% of optometry student respondents said they had experienced discrimination from tutors, lecturers or supervisors in the last 12 months (a two-percentage point increase on the previous year), compared with 2% of DO student respondents (up two percentage points from zero last year).

60. 20% of optometry student respondents reported taking a leave of absence due to stress in the last 12 months compared to 15% of fully qualified optometry respondents. The figure for DO student respondents was 14% compared to 11% of fully qualified DO respondents.[13]

[13] GOC Workforce and Perceptions Survey 2026

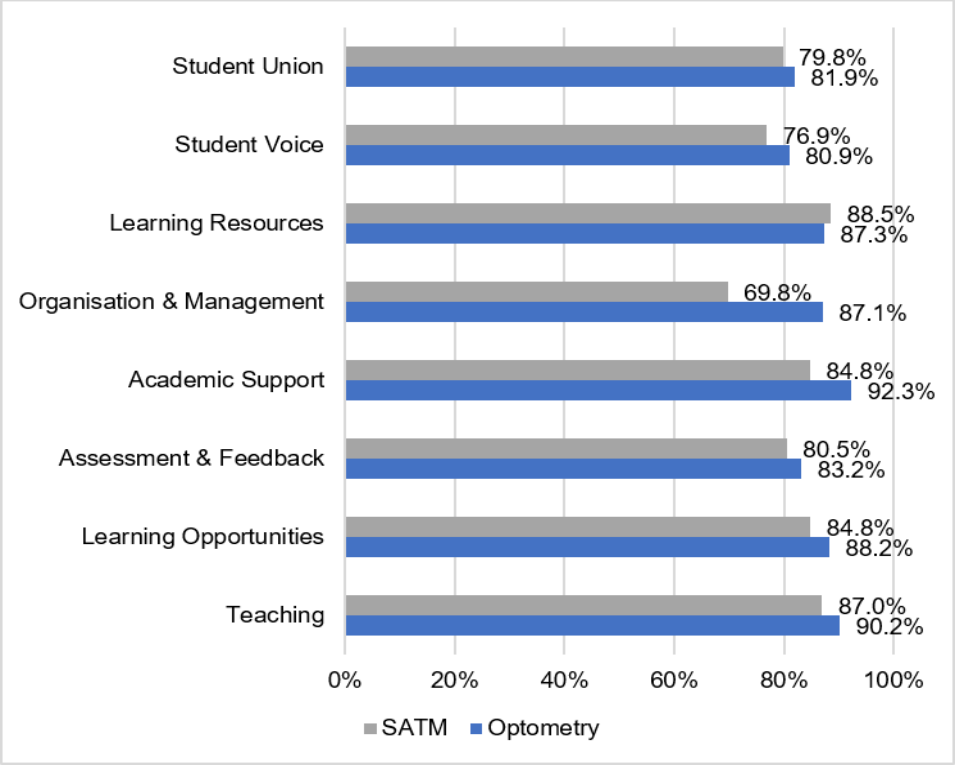
61. 42% of student optometrists and 29% of student dispensing opticians reported feeing under pressure to meet commercial targets at the expense of patient care, compared to 33% of fully qualified optometrist and 22% of fully qualified dispensing opticians. 69% of optometry student respondents were confident in their ability to resist commercial pressures that they believed could compromise patient care, compared with 89% of DO student respondents. In contrast, 69% of optometrists surveyed did not believe their education and training equipped them to manage commercial pressures well while maintaining safe patient care, compared with 40% of dispensing opticians.

62. The GOC's 2026 thematic review on commercial practices and patient safety notes that a greater focus on supporting students and early career professionals is needed given the importance of education and training to prepare future registrants to identify and manage conflicts of interest, behave ethically when encountering commercial pressures and maintain professional autonomy.

Optometry

63. By category[14], the averages for student satisfaction are illustrated in in the table below. The range of the average of OP NSS scores is between 80.9% and 92.3% for all categories. The average score for OP qualifications in the NSS is above the average for SATM for 7 of the 8 categories.

Table 22 – NSS category scores (OP)



[14] The figures refer to the proportion (%) of students expressing satisfaction in each category of their university experience. An explanation of the category groupings is provided at Appendix 3.

Outcome 4: A strong, innovative and resilient sector

Number of GOC approved qualifications

64. The number of qualifications across the GOC's regulated professions is increasing with two new optometry qualifications and a new dispensing optics apprenticeship launching in 2026. Some providers of dispensing optics qualifications against the handbook have become ABDO teaching centres under the Education and Training Requirements, and there is potential for new qualifications in both dispensing optics and optometry.

Table 23 – Number of qualifications

Qualification type	Number of providers	Number of qualifications under handbook	Number of qualifications under ETR*
Optometry (OP)	18	22	17**
Independent prescribing (IP)	6	3	3***
Dispensing optics (DO)	7	2	5
Contact lens optician (CLO)	1	0	1

*Includes providers with full GOC approval already adapted to the ETR or at stage 4 of the staged application process who have been granted GOC approval to recruit to the qualification.
**Includes two quals combined Optom with IP
*** Standalone IP qualifications only, not including combined Optom with IP

Quality Assurance and Enhancement activities

65. We are continuing to quality assure against both the handbook and ETR until all handbook qualifications are taught out. Our quality assurance activities consist of visits to providers, processing adaptations for existing qualifications moving from the handbooks to the ETR, reviewing applications for GOC approval against the ETR, and setting and monitoring conditions for qualifications.

66. Our quality assurance and enhancement method helps us to identify whether there are any repeated areas of concerns for particular qualifications. For example, if we identify that a qualification is consistently not meeting a particular requirement we are able to set conditions to continue to monitor and then trigger further quality assurance, like a risk-based review, if required. Under our new quality assurance and enhancement methodology (QAEM) we will be able to monitor areas of repeated concern and non-assurance both within qualifications and across the sector.

67. A summary of QA activity for the 2024/25 academic year is provided below:

Table 24: Summary of QA activity for the 2024/25 academic year.

Activity	Statistics
Handbook Quality Assurance (QA) visits	• 3 QA visits in the 2024/25 academic year.
ETR Adaptation outcomes *(this only includes adaptations where the adaptation outcome report had been issued in that academic year)*	• 9 adaptations completed in the 2024/25 academic year. • 174/194* standards were deemed met. ○ This equates to 90%. **The number of standards met (194) counts the same standard multiple times if it was reviewed for different qualifications.*

Applications	• Application submissions in the 2024/25 academic year:
	  ○ Stage 1: x3
	  ○ Stage 2 (including Stages 1-2 combined): x1
	  ○ Stage 3 (including Stages 1-3 combined) x2
	  ○ Stage 4: x1

Conditions	• 45 conditions were set across all processes (including QA visits, adaptation outcomes and applications). 32 conditions have been met and 13 remain open. 12 relate to one qualification going through the application process where the conditions remained open after stage 4a. ○ For QA visits, 12 conditions were set.
Change notifications	• 46 notifications were submitted and one remains open due to the provider awaiting information from a third party.
Serious Concerns review (SCRs)	• No SCRs were issued or conducted.

Financial Sustainability

68. The funding of higher education is a devolved matter, and different funding methods exist in each nation of the UK. The sufficiency and sustainability of funding for optical education remains a key risk for the sector with the Office for Students (OfS) reporting 35.8% of higher education providers in England with a deficit for 2024/25 (an improvement on the previous year's 44.2%), whilst

expected to rise to 42.7% in 2025/26 based on provider forecasts[15]. Meanwhile the Institute of Fiscal Studies (IFS) estimates that funding for teaching resources per-student in England has fallen by 22% in real terms since 2012/13, however, the government's commitment to increase the fee cap with inflation this year to £9,535 will, according to the IFS, arrest the decline in real terms.[16] A 2026 report by KPMG for the Department for Education observes that compared to a previous study in 2019, the average unit cost of a full-time first degree qualification has risen by 11% to 31% at the subject level but remains below the rate of inflation (41% for the period AY2016-17 to 2023-24).[17]

69. As reported last year, the former Secretary of State for Education Bridget Phillipson MP, announced that funding will be refocussed away from Level 7 (masters-level) apprenticeships from January 2026. Meanwhile, the Secretary of State wrote to the OfS in July 2026 setting out funding priorities for the 2026/27 financial year. Whilst funding will be cut in a number of areas, the Secretary of State has requested that funding for high-cost courses in Price Groups A and B is protected, and alongside that, funding supplements for nursing, midwifery and allied health courses (which includes optometry and ophthalmic dispensing) are also protected "recognising their importance to the government's 10 Year Health Plan".[18]

70. In England, following the completion of the Education Strategic Review, with qualifications integrating at least 1600 hours / 48 weeks of patient-facing learning and experience in practice, Ministers have agreed that support will continue to be provided for the supervision of optometry trainees to any contractor who holds a GOS contract and is providing placements as part of an ETR qualification. Contractors will have been able to claim up to £4,010 per eligible student for training completed between 1 April 2025 and 31 March 2026 for a placement period between 44-48 weeks.[19]

71. In Scotland, the amount paid to supervisors claiming a grant for taking on a pre-registration trainee optometrist on or after 1 April 2025 increased by 4% to £4,644.[20] Meanwhile, in Wales, there is a pre-registration supervisor grant of £7,500.[21]

72. In the annual returns, financial sustainability is a significant concern with providers noting that that implementation of the ETR has increased operational

[15] Financial sustainability of higher education providers in England, OFS, 14 May 2026, p39
[16] Annual Report on education spending in England: 2025-26, Institute for Fiscal Studies (ifs.org.uk), January 2026, p12
[17] Understanding the cost of undergraduate provision and qualifications in the higher education sector in England, KPMG for the Department for Education, September 2026, p74
[18] Public letter from the Secretary of State for Education, 6 July 2026
[19] Letter setting out general ophthalmic services fees and payments from 1 April 2025, DHSC, 8 December 2025
[20] Letter setting out GOS remuneration increases in Scotland, Scottish Government, 19 August 2025
[21] Wales General Ophthalmic Services clinical fees, as currently listed.

complexity and in some cases, the direct cost of qualification delivery with cited factors including enhanced clinical experience, supervision, specialist equipment and staffing requirements. A broad concern noted in the returns is the challenging financial climate in higher education with potential consequences for staffing, resources, student experience and sustainability, with some providers noting their department has been affected directly. As reported in last year's UK Education Report there is ongoing concern that the funding climate will put staff:student ratios (SSR) under pressure; and in this context, we asked SPOKE to produce guidance on SSRs.[22]

73. Providers of GOC approved qualifications have reported significant resourcing and investment decisions in three broad areas. First, for **clinical facilities, equipment and simulation-based learning,** examples cited in the returns include refurbished or expanded eye clinics, new OCT units, slit-lamp simulators, VR/simulation suites, upgraded laboratories, and modernised clinical teaching environments amongst others. Second, for **staffing, teaching capacity and academic infrastructure,** providers have referred to recruiting or increasing clinical tutors, using visiting lecturers, external experts, practice-based educators, PhD students, part-time supervisors and specialist clinicians to support delivery, notwithstanding resource pressures as noted above which include difficulty recruiting GOC-registered academic staff, long-term staff absence, and the challenge of running legacy and new programmes simultaneously, amongst others. Third, for **placement capacity, partnerships and flexible delivery models,** providers are expanding relationships with NHS bodies, hospitals, community practices, high-street providers, employers, local authorities, charities and professional bodies to secure placements and diversify experience with patients. Alongside this, several are adapting programme models through blended learning, online assessment, e-portfolios, digital resources and apprenticeship routes, amongst others.

Innovation

74. 80% of optometry ETR qualifications utilised the method for delivering professional and clinical learning and experience established by the College of Optometrists in partnership with providers and employers (CLiP). Alternatives to the CLiP model include the University of Manchester which includes the integration of patient facing experience throughout the duration of the qualification, as well as qualifications in Scotland developed in partnership with Public Services Delivery Scotland (PSD Scotland). Meanwhile, Glasgow Caledonian University (GCU) launched the UK's first integrated optometry and independent prescribing MOptom (IP) qualification in 2024 in partnership with PSD Scotland, followed by the University of the Highlands and Islands in 2025.

75. The returns provide substantial evidence of innovation and good practice. Common strengths include blended and flexible delivery, investment in clinical

[22] Not published at the time of writing

and simulation facilities (virtual learning environments), multi-disciplinary (MDT) learning, expanded placement networks, strong student support and feedback cultures, providing a wide range of career options beyond traditional routes, and closer partnerships with NHS, community, charitable and commercial organisations.

76. Several providers emphasised MDT learning across the school or faculty sharing teaching with orthoptics, dispensing, pharmacy, medicine and other health qualifications. Many providers are strengthening external and in-house clinical opportunities in specialist areas such as myopia management, medical retina and glaucoma. Providers have modernised their curriculum to align with the ETR, advanced clinical skills and evolving professional roles in optics. Some providers discussed integrating the responsible use of AI into teaching. A SPOKE project mapping the use of AI in teaching and identifying gaps and understanding sector perspectives about the impact of AI launched in February 2026.

77. Other notable innovations reported by providers include initiatives to support widening participation and access to GOC approved qualifications. They include: flexible study routes, apprenticeship models in dispensing optics, initial year programmes, support for non-standard entrants, earn-while-learning approaches, targeted academic support, disability/neurodiversity support and efforts to reach students outside traditional recruitment areas.

Risk

78. Across the returns, the most consistent strategic risks cited are financial pressure, shortages of suitably qualified academic clinicians, competition for staff, and the need to secure high-quality placements at scale.

79. Many providers are continuing to manage the complexity of teaching out legacy handbook qualifications whilst running adapted or new ETR qualifications. A recurring risk over the last two years is a shortage of academically trained, GOC-registered clinicians, with providers reporting limited selection particularly at senior levels, staff absences, and continuity of provision when staff may retire. Some concerns about placement capacity were raised in the returns both in relation to optometry and independent prescribing. The legacy of the pandemic was noted by some providers with ongoing impacts including mental wellbeing of students, and difficulties for a small number of DO students gaining the required case records needed to complete their qualification.

80. Whilst independent prescribing and advanced clinical services have been cited as growth areas by some providers, the enhancement of other health professionals' scope of practice in the long-term could, it was noted, reduce the need for optical staff in some areas. Meanwhile, whilst AI is viewed by some

providers as an opportunity, risks have also been identified in relation to the integrity of student assessment and future workforce demand.

Outcome 5: Post-registration qualifications support registrants to deliver a wide range of eye care services

81. The GOC's post-registration qualifications in independent prescribing and contact lens optics as well as a growing number of specialist qualifications are helping to prepare optical professionals to deliver enhanced eye care in community settings with an increasing ageing population, whilst helping to relieve pressure on GPs and hospital eye care services.

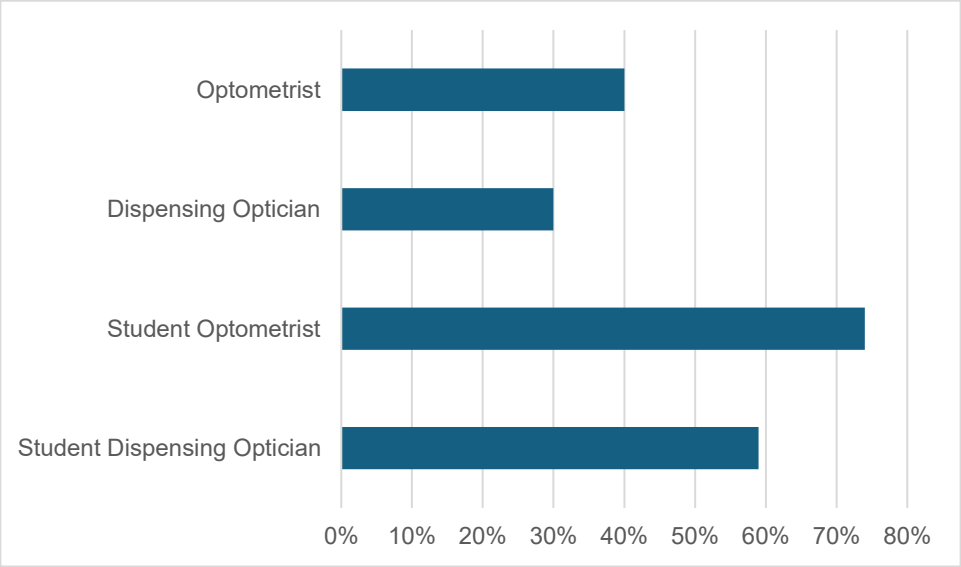
Interest in post-registration qualifications

82. Well over a third of respondents (42%) to the GOC's 2026 registrant survey had at least one additional qualification, including 16% who had a glaucoma qualification and 13% who had a medical retina qualification. Additional qualifications are more prevalent among optometrists than dispensing opticians, with optometrists more likely to report having at least one (49% vs 40%).

83. 40% of respondents were considering obtaining additional qualifications in the next 12-24 months. There is significantly greater interest in gaining additional qualifications/skills amongst younger respondents and optical students when compared with older respondents and fully qualified registrants.

84. The top three additional qualifications of interest were glaucoma (40%), medical retina (39%), and independent prescribing (38%).[23] Amongst dispensing optician respondents, interest in moving to optometry has fallen over the last three years by 6% pts (22% in 2024, 16% in 2026).

Table 25 – Plans to gain additional qualifications by registration type



[23] Ibid, p20, 21 & 62

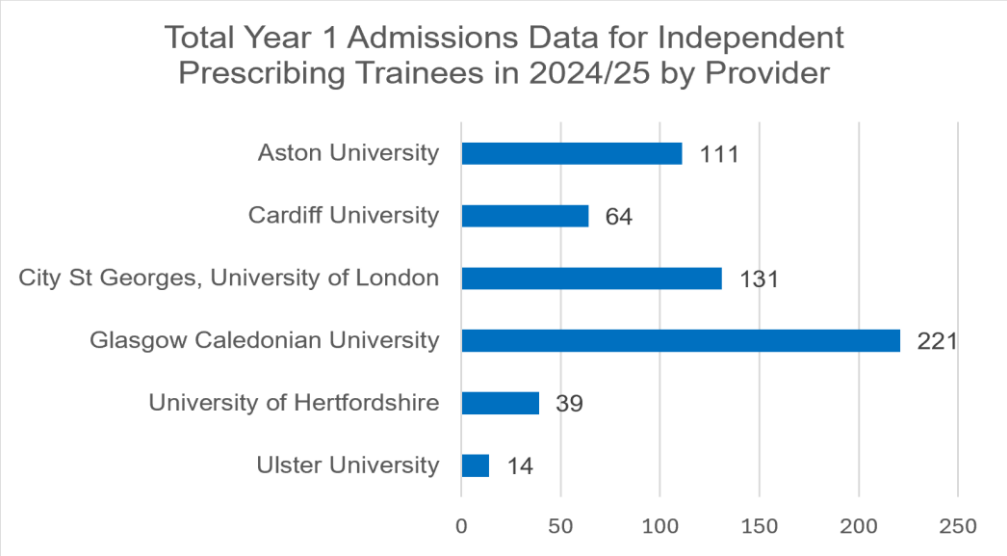
Independent prescribing

85. Unless otherwise indicated, the comments here relate to all independent prescribing and therapeutic prescribing (IP) qualifications, excluding the IP approved qualification offered by the College of Optometrists.

86. As of March 2026, 2,474 (2,066 in 2025) GOC registrants are registered as independent prescribing optometrists, an increase of 19.7% from 2025.

87. The number of IP trainees increased substantially from 415 in 2023/24 to 580 in 2024/2025 – a 39.8% increase.

Table 26 – Number of IP trainees by provider



88. Whilst nearly all education and training providers have adapted to the ETR for entry-level qualifications, three providers are still delivering the handbook IP qualification (see *ETR Adaptations status in Annex 2*).

89. As reported last year, the recent 2025 SPOKE report on enhancing the scope of practice in optical professionals questioned the sustainability of IP qualifications as a result of lower numbers of potential supervisor practitioners (compared with contact lens optics) and recommended increased recognition and status of supervision across the sector and mentoring of others as a core expectation for all registrants.[24]

[24] Enhancing the scope of practice in optical professionals, SPOKE Project 3, p6. January 2025

Key data – IP qualifications

Table 27 – Number of IP trainees

Total students	2022/23	2023/24	2024/25
Total IP trainees	521	415	580

Table 28 – Admissions and attainment (IP)

Metric	Lowest	Average	Highest
Applicants admitted	53.3%	68.2%	89.5%
Attainment – pass or higher	91.2%	96.8%	100.0%

90. The number of applications to IP qualifications jumped by 71.5% from 460 in 2023/24 to 789 in 2024/25 indicating increased competition for places. IP qualifications admitted an average of 68.2% of applicants (83.8% in 2023/24; 91.4% in 2022/23).

91. IP qualification admission sizes ranged from 14 to 221 with an average of 97. In 2023/24, this was 13 to 114 with an average of 69; in 2022/23, this was 15 to 215 with an average of 80.

92. An average of 96.8% (95.6% in 2023/24; 98.3% in 2022/23) of students passed the IP qualification, with three of the six qualifications having a pass rate of 100%. Meanwhile, the pass rate for the College of Optometrists' Therapeutic Final Common Assessment was 76% (78% in 2023-24; 76% in 2022/23).

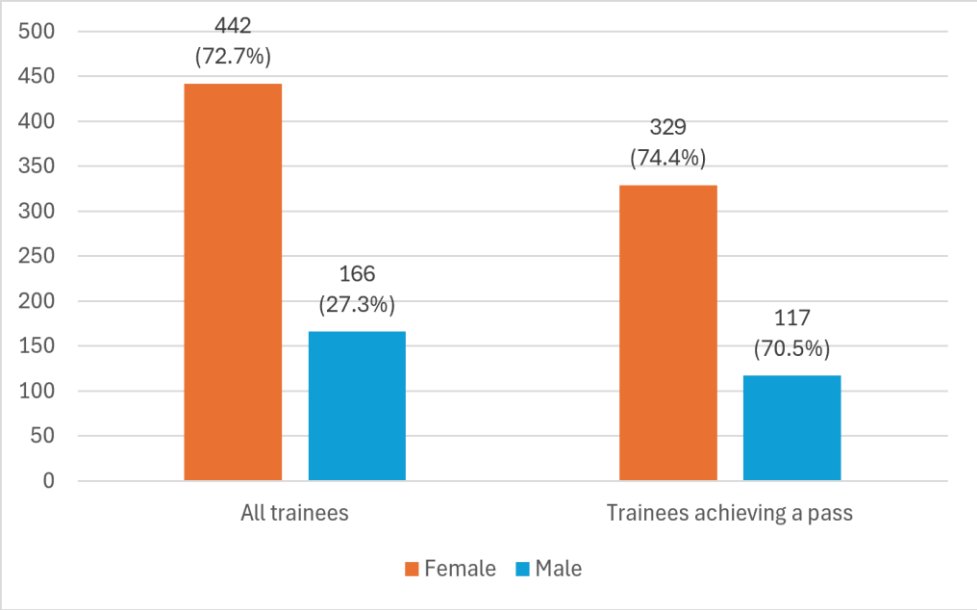
93. In terms of EDI cohort data, on average, 60.9% of IP students are aged 30 or over; 53.1% are White and 35.8% are Asian; 74.0% are female.

Progression from entry-level qualifications

94. We compare registrants with a specialist qualification on the GOC register and optical professionals training to acquire a specialist qualification as an indication of progression from entry level qualifications. The percentage of black IP trainees and black IP registrants are similar (2.6% and 1.2% respectively). There are a higher percentage of Asian trainees than Asian IP registrants (35.8% and 28.2%). There are a lower percentage of white trainees than white IP registrants (53.1% and 59.1%). There are a lower percentage of male trainees to male IP registrants (25.6% and 36.9%). Meanwhile the percentage of white CLO trainees and white CLO registrants are similar (76.7% and 72.7%). There are a higher percentage of male trainees to male CLO registrants (43.3% and 36.2%).

Independent prescribing EDI data

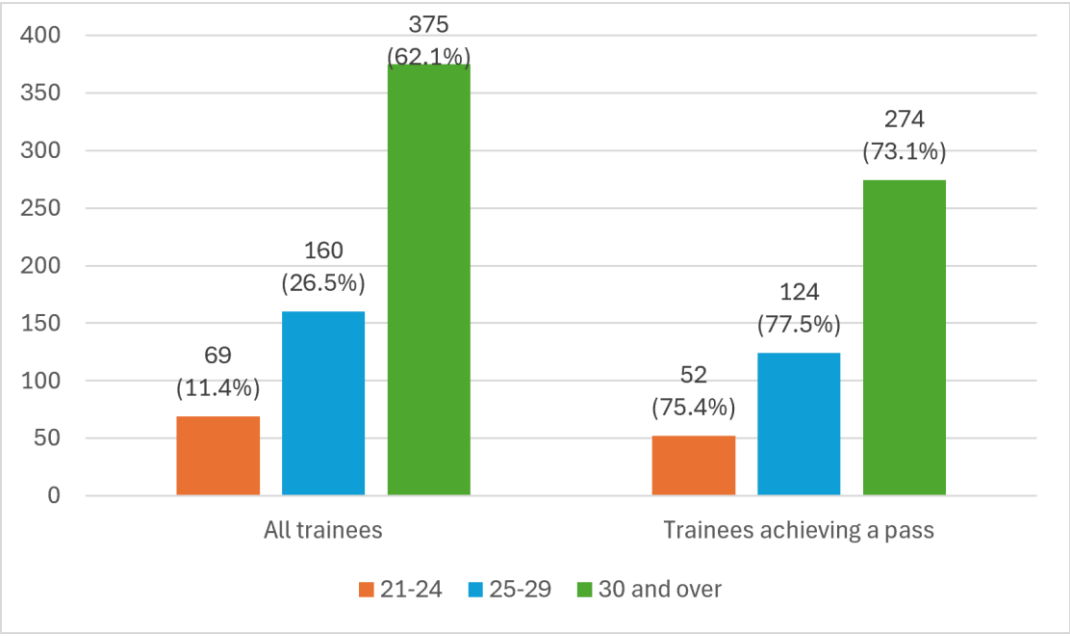
Table 29 – IP attainment by gender



Standard deviation – Trainees achieving a pass
Female σ = 21.8%
Male σ = 14.1%

95. Of IP trainees, 74.0% were female and 26.0% were male (av' mean). Attainment rates were slightly higher for female trainees (74.4%) than male trainees (70.5%), a difference of 3.9 percentage points. Statistical testing did not identify a statistically significant difference in attainment between female and male trainees.

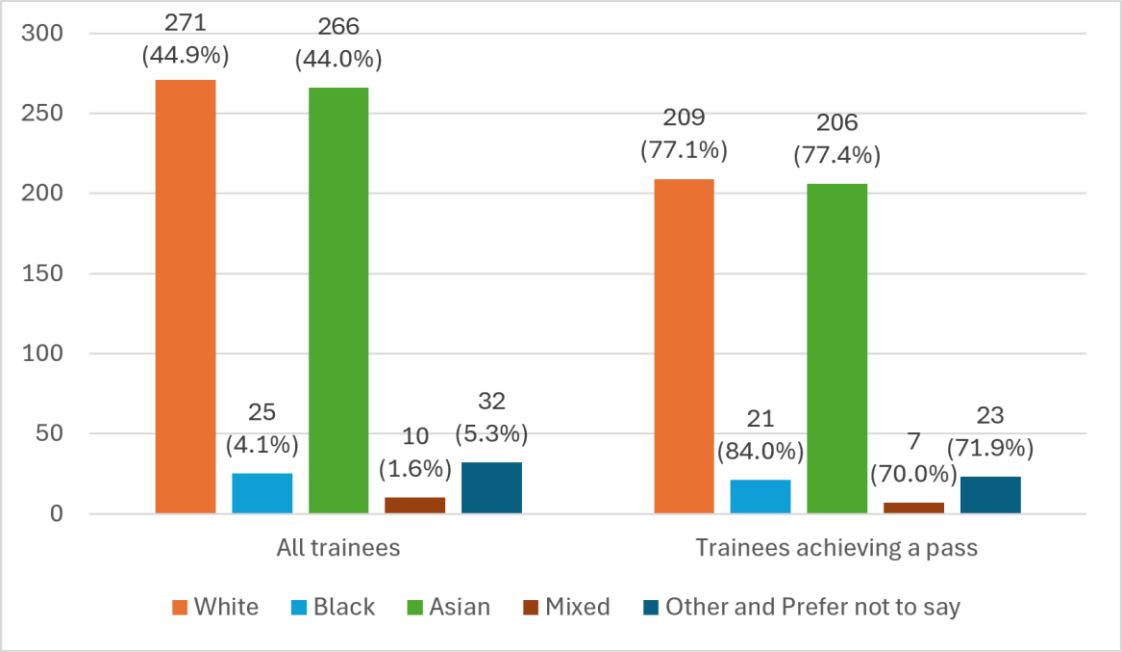
Table 30 – IP attainment by age group



Standard deviation – Trainees achieving a pass
21-24 σ = 13.0%
25-29 σ = 19.7%
30 and over σ = 17.3%

96. Nearly two-thirds of IP trainees (60.9%) were aged 30 or over (av' mean). Attainment rates were broadly similar across age groups, ranging from 73.1% among trainees aged 30 and over to 77.5% among those aged 25-29. The largest difference observed was 4.4 percentage points between trainees aged 25-29 and those aged 30 and over. Statistical testing did not identify a statistically significant difference in attainment between age groups.

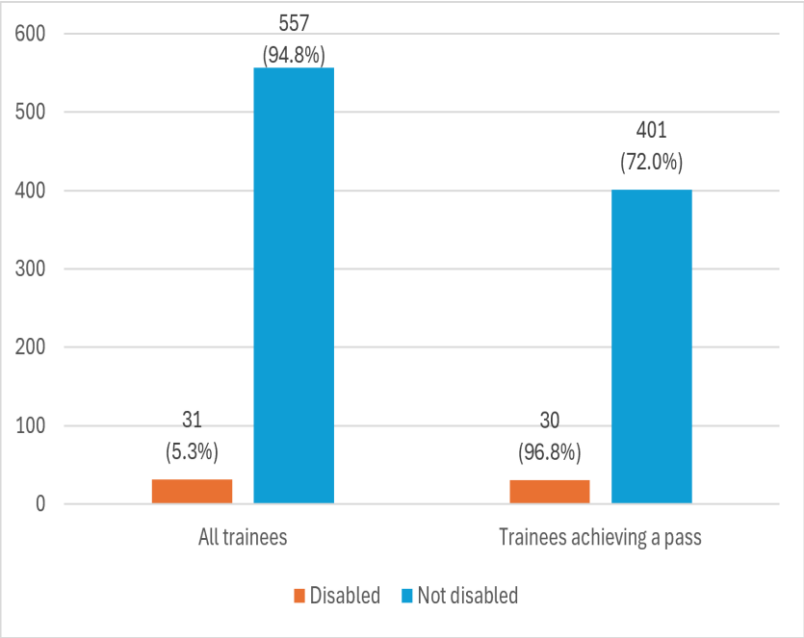
Table 31 – IP attainment by ethnicity



Standard deviation – Trainees achieving a pass
White σ = 18.0%
Black σ = 31.3%
Asian σ = 18.9%
Mixed σ = 23.6%
Other and Prefer not to say σ = 19.8%

97. The largest ethnic groups among IP trainees were white (44.6%) and Asian (43.8%) (av' mean). Attainment rates were similar for white trainees (77.1%) and Asian trainees (77.4%). Black trainees achieved the highest attainment rate (84.0%), although the cohort size was relatively small (25 trainees). Mixed ethnicity trainees had the lowest attainment rate (70.0%), though numbers were also small. Statistical testing did not identify a statistically significant difference in attainment by ethnicity.

Table 32 – IP attainment by disability



Standard deviation – Trainees achieving a pass
Disabled σ = 20.0%
Not disabled σ = 17.4%

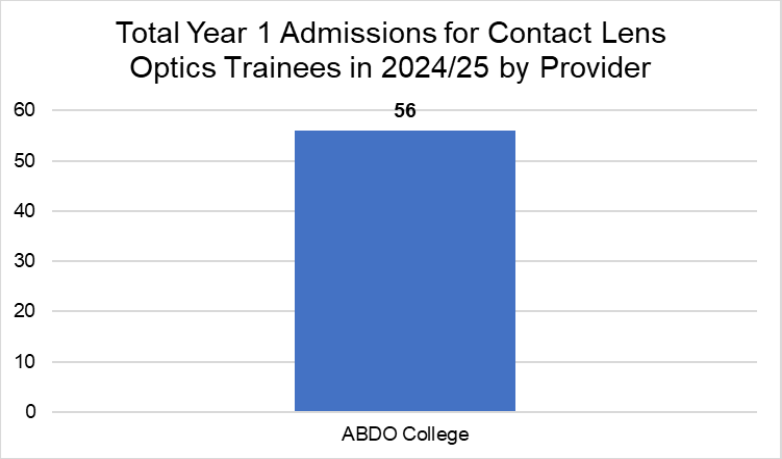
98. A relatively small proportion of IP trainees (6.5%) declared a disability (av' mean). Attainment rates were 96.8% among trainees declaring a disability compared with 72.0% among trainees not declaring a disability, a difference of 24.8 percentage points. Statistical testing identified a statistically significant difference in attainment by disability status. However, given the relatively small number of trainees declaring a disability (31), this finding should be interpreted with caution.

Contact lens opticians

99. As of March 2026, 1,168 (1,045 in 2025) GOC registrants are registered as contact lens opticians, an increase of 11.8% from 2025.

100. The number of trainees on contact lens optics (CLO) qualifications has fallen over the last three years by 114.6% (41 in 2025/26, 56 in 2024/25 and 88 in 2023/24). The GOC has been informed that work is being undertaken with employers to understand why they have been reluctant to support CLO trainees.

Table 33 – Number of CLO trainees by provider



Key data – CLO qualifications

Table 34 – Total students (CLO)

Total students	2023/24	2024/25	2025/26
Total students in year 1 cohort	88	56	41

Table 35 – Admissions and attainment (CLO)

Metric	Lowest	Average	Highest
Applicants admitted	100.0%	100.0%	100.0%
Attainment – pass or higher	N/A	N/A	N/A

* At the time of submitting the form no students had completed all six units of the Diploma in Contact Lens Practice.

Observations

101. ABDO College admitted 100.0% of their applicants (over 92% in 2023/24; 83% in 2022/23).

102. EDI data shows that, like previous years, most CLO students are females: 53.3% (65.2% in 2023/24; 80.2% in 2022/23). Also, EDI data shows that 63.3% are aged 30 years or above (65.7% in 2023/24), which is unsurprising for a qualification taken after initial qualification. 76.7% of students on CLO qualifications are White.

Annex 1: Background information

Annual monitoring return requirements

A1.1 The GOC is required to "keep informed of the nature of the instruction given by any approved training establishment to persons training as optometrists or dispensing opticians and of the assessments on the results of which approved qualifications are granted", under s.13(1) Opticians Act 1989. Qualifications leading to a registrable therapeutic / independent prescribing (IP) or contact lens optician (CLO) specialism are also included within the GOC's regulatory scope.

A1.2 In executing this duty, we approve and quality assure qualifications leading to GOC registration or speciality registration, which includes all elements of training, learning and assessment that a provider must deliver for its students to be awarded a GOC approved qualification that meets the GOC's requirements and to enable students to be eligible to register with the GOC as an optometrist (OP) or dispensing optician (DO), or with an IP or CLO specialty, upon successful completion of their training and assessment.

A1.3 As part of our quality assurance and enhancement method of qualifications, all providers are required to demonstrate how their approved qualification(s) meet our requirements, as set out in the ETR. We seek assurance from these providers in several ways, including quality assurance visits, notification of reportable events and changes, conditions management, and the compulsory AMR submission. We also scrutinise and note proposed adaptations to qualifications to ensure they meet the ETR requirements.

Annual monitoring returns process

A1.4 Providers were required to report information for the period 1 September 2024 – 31 August 2025.

A1.5 Providers of GOC approved qualifications(s) were required to submit information relating to qualification risks to delivery, lessons learned, and good practice.

A1.6 We issued the AMR forms to providers on 1 November 2025. Providers were required to submit a completed form by 30 January 2026. Compliance with this year's AMR process was good, with all returns submitted by 6 February 2026. Responses to additional queries were generally prompt. No compliance breaches occurred.

A1.7 Every AMR must be signed by a 'responsible officer'. The responsible officer is a staff member with sufficient authority to represent the provider and bears ultimate responsibility for the information submitted in the return. The

responsible officer must only sign off the form when they are satisfied that the information gives a true and fair account of the qualification.

A1.8 We analysed the information to identify:

- current risks and issues relating to individual approved qualifications(s);
- themes, strengths, and risks within the optical education sector;
- the diversity of students within the optical sector;
- examples of good practice and lessons learnt; and
- ways the GOC's quality assurance activities could be developed.

A1.9 The analysis and outcomes are based upon the information and data as calculated and submitted by providers of GOC approved qualifications. We have not sought to externally verify the information submitted.

A1.10 We consider all feedback from stakeholders regarding the 2024/25 AMR process and use this to help refine the AMR process.

A1.11 The publication of this report closes the 2024/25 AMR process.

Caveats to the GOC Approved Qualifications Report

A1.12 The AMR process is in continuous development and we will make refinements and improvements for each year of the process.

A4.13 The findings, analysis, and outcomes of this year's AMR process will be fed into the GOC Education Operations team's approval and quality assurance activities and used by the GOC Education Development team to develop policy and to inform processes.

A4.14 Please note that the findings from providers outlined in this report are indicative and do not represent a formal position or policy of the GOC. The findings in this report should not be relied upon for advice or used for any other purpose and may not be representative.

A4.15 The analysis and outcomes contained within this report are based solely upon the information and data as calculated and submitted by the qualifications. We have not sought to externally verify the information and data submitted. The responsible officer for each qualification has attested that the information submitted in the AMR gives a true and fair view of that qualification.

A4.16 The information provided by each professional association qualification in relation to student attainment (assessment pass rates) has been calculated on different bases (i.e., the basis for each calculation has been different) from the other professional association qualifications and the academic qualifications.

Annex 2: ETR adaptations / application status

Qualification type	Qualification provider	Adaptation/application status	Start date
Optometry	Anglia Ruskin University	Adapted	Sep 23
	Aston University	Adapted	Sep 23
	University of Bradford	Adapted	Sep 24
	University of Bradford – accelerated route	Not yet adapted	TBC
	Cardiff University	Adapted	Sep 23
	De Montfort University	Stage 4 application	Sep 26
	City St George's, University of London	Adapted	Sep 23
	University of Lancashire	Adapted	Sep 23
	University of Leicester	Stage 4 application	Sep 26
	Glasgow Caledonian University (with IP)	Adapted	Sep 24
	University of Hertfordshire	Adapted	Sep 23
	University of Huddersfield	Adapted	Sep 24
	University of Manchester	Adapted	Sep 24
	University of Plymouth	Adapted	Sep 23
	Teesside University	Adapted	Sep 24
	University of the Highlands and Islands (with IP)*	Stage 4 application *UHI's submission is being managed as an application (UHI-OP-IP1-APP) due to the inclusion of IP which does not have GOC approval currently	Sep 25
	University of the West of England, Bristol	Adapted	Sep 24
	Ulster University	Adapted	Sep 23
Dispensing optics	ABDO	Adapted incorporating: ABDO College, Bradford College and Capital City College (formerly City and Islington College) which are now ABDO teaching centres	Sep 23
	ABDO - Apprenticeship	Stage 4 application	Sep 24
	Anglia Ruskin University	Adapted	Sep 23
	Anglia Ruskin University Apprenticeship	Stage 4 application	Sep 26
	University of Lancashire	Adapted	Sep 23
	Glasgow Caledonian University	Adapted	Sep 26
Independent prescribing	Aston University	Adapted	Oct 23
	Cardiff University	Adapted	Sep 24
	City St George's, University of London	Adapted	Sep 26
	Glasgow Caledonian University	Adapted	Jan 26
	University of Hertfordshire	Adapted	TBC
	Ulster University	Adapted	Sep 27
Contact lens optics	ABDO	Adapted incorporating: Bradford College and ABDO College which are now ABDO teaching centres	Sep 24

Annex 3: Data tables

A2.1 Unless otherwise specified, the data reported below relates to the period 1 September 2024 – 31 August 2025.

A2.2 Unless otherwise specified, the data reported below relates to 'academic' (non-professional association) qualifications.

A. Application data*

	Admissions Ratio (Applications:Admissions)		UCAS Points Offer (equivalent)	
	Average	**Median**	**Average**	**Median**
All Qualifications	35.3%	20.2%	133.7	136.0
Optometry	18.9%	18.3%	133.7	136.0
Dispensing optics	Dispensing optics information is not available given the disparate size of providers and that the dominant provider is not routed via UCAS			
Independent prescribing	68.2%	68.2%	N/A	N/A
Contact lens opticians	100.0%	100.0%	N/A	N/A

* The admissions ratio does not infer the overall volume of individual applicants who were unable to secure a place as each may have applied for more than one optical qualification.

B. Average cohort data: The reporting year (2024/25)

	Year 1	**Year 2**	**Year 3**	**Year 4**
Optometry	75	69	61	23
Dispensing optics	112	63	47	N/A
Independent prescribing	71	55	N/A	N/A
Contact lens opticians	56*	N/A	N/A	N/A

* one provider only

C. Average cohort data: Next reporting year (2025/26)

	Year 1	**Year 2**	**Year 3**	**Year 4**
Optometry	86	66	66	22
Dispensing optics	279	482	293	N/A
Independent prescribing	46	51	N/A	N/A
Contact lens opticians	41*	N/A	N/A	N/A

* one provider only

D. Student average progression

	Progression from first year	**Progression to the following year**	**Students completing the qualification**
Optometry	82.8%	91.9%	92.5%
Dispensing optics	79.9%	91.9%	100.0%

E. Student average attainment: optometry, dispensing optics, and both qualifications

	Pass grade*	Fail
Both qualifications	89.3%	4.1%
Optometry	96.7%	1.9%
Dispensing optics	98.6%	7.9%

*a pass grade for optometry is a 2:2 degree or higher whilst for dispensing optics it may include a "pass" or other grade such as a 2:2 degree or higher.

F. Student average attainment: Independent Prescribing and Contact lens opticians

	Pass	Fail
Independent prescribing	96.7%	3.2%
Contact lens opticians	N/A*	N/A*

* No students had completed the 6 units of the Diploma in Contact Lens Practice at the time of submitting the AMR return.

G. Student average attainment: Professional Associations*

	Pass	Fail	Resits (as a % of total number of students examined)
Professional Association (dispensing opticians)**	29.11%	70.89%	20.37%
Professional Association (independent prescribing & optometry)	93.4%	24.0%	16.0%
Contact lens optics is now a fully integrated ETR qualification	N/A	N/A	N/A

* This table will be removed once all approved qualification cohorts have been assessed under the ETR.
**Relates to first attempts of the final assessments

H. National Student Survey – average satisfaction score by category

	Optometry	Subjects allied to medicine
Teaching	90.2%	87.0%
Learning Opportunities	88.2%	84.8%
Assessment & Feedback	83.2%	80.5%
Academic Support	92.3%	84.8%
Organisation & Management	87.1%	69.8%
Learning Resources	87.3%	88.5%

Student Voice	80.9%	76.9%
Student Union	81.9%	79.8%

I. EDI – Average gender data

	Female	Male
All qualifications	70.0%	29.7%
Optometry	71.0%	28.9%
Dispensing optics	65.3%	34.3%
Independent prescribing	74.0%	25.6%
Contact lens opticians*	53.3%	43.3%

* one provider only

J. EDI – Average age data

	20 & under	21-24	25-29	30 and over	Unknown / Prefer not to say
All qualifications	46.1%	15.9%	13.8%	24.2%	0.2%
Optometry	67.1%	19.4%	6.1%	7.3%	0.0%
Dispensing optics	55.2%	16.0%	11.0%	16.5%	1.4%
Independent prescribing	0.0%	7.7%	31.2%	60.9%	0.0%
Contact lens opticians*	0.0%	Withheld	26.7%	63.3%	Withheld

* one provider only, and some data withheld so percentage does not add up to 100

K. EDI – average disability data

	Known disability	No known disability	Unspecified / Prefer not to say
All qualifications	11.0%	85.9%	2.7%
Optometry	14.0%	83.7%	2.3%
Dispensing optics	8.5%	82.2%	7.1%
Independent prescribing	6.5%	93.3%	0.3%
Contact lens opticians*	0.0%	100.0%	0.0%

* one provider only

L. EDI – Average ethnicity data

	White	Black	Asian	Mixed	Other / Not known
All qualifications	38.7%	3.0%	50.0%	1.9%	7.1%
Optometry	28.0%	4.1%	59.6%	2.5%	5.6%
Dispensing optics	46.0%	0.4%	38.4%	1.0%	11.8%
Independent prescribing	53.1%	2.6%	35.8%	1.4%	6.9%
Contact lens opticians*	76.7%	Withheld	Withheld	Withheld	Withheld

* one provider only, and some data withheld so percentage does not add up to 100

M. EDI – Average refugee status data

	All students/trainees	Year 1 students/trainees
All qualifications	<0.1%	<0.1%
Optometry	0.2%	0.2%
Dispensing optics	0.0%	0.0%
Independent prescribing	0.0%	N/A
Contact lens opticians	0.0%	N/A

Annex 4 – 2025 National Student Survey categories

#	Question	Category
1	How good are teaching staff at explaining things?	**Teaching**
2	How often do teaching staff make the subject engaging?	
3	How often is the course intellectually stimulating?	
4	How often does your course challenge you to achieve your best work?	
5	To what extent have you had the chance to explore ideas and concepts in depth?	**Learning Opportunities**
6	How well does your course introduce subjects and skills in a way that builds on what you have already learned?	
7	To what extent have you had the chance to bring together information and ideas from different topics?	
8	To what extent does your course have the right balance of directed and independent study?	
9	How well has your course developed your knowledge and skills that you think you will need for your future?	
10	How clear were the marking criteria used to assess your work?	**Assessment & Feedback**
11	How fair has the marking and assessment been on your course?	
12	How well have assessments allowed you to demonstrate what you have learned?	
13	How often have you received assessment feedback on time?	
14	How often does feedback help you to improve your work?	
15	How easy was it to contact teaching staff when you needed to?	**Academic Support**
16	How well have teaching staff supported your learning?	
17	How well organised is your course?	**Organisation & Management**
18	How well were any changes to teaching on your course communicated?	
19	How well have the IT resources and facilities supported your learning?	**Learning Resources**
20	How well have the library resources (e.g. books, online services and learning spaces) supported your learning?	
21	How easy is it to access subject specific resources (e.g. equipment, facilities, software) when you need them?	
22	To what extent do you get the right opportunities to give feedback on your course?	**Student Voice**

23	To what extent are students' opinions about the course valued by staff?	
24	How clear is it that students' feedback on the course is acted on?	
25	How well does the students' union (association or guild) represent students' academic interests?	**Student Union**
26	How well communicated was information about your university/college's mental wellbeing support services?	**Mental Wellbeing Services**